## McCUTCHEN, BLACK, VERLEGER & SHEA

COUNSELORS AT LAW 600 WILSHIRE BOULEVARD

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HOUSTON OFFICE 2100 TEXAS COMMERCE TOWER 600 TRAVIS HOUSTON, TEXAS 77002 TELEPHONE (713) 236-0020 FAX: (713) 236-1012

August 3, 1989

Ms. Alisa Greene U.S. Environmental Protection Agency Region IX (T-4-1) 215 Fremont Street San Francisco, California 94105

> Hawker Pacific Inc./San Fernando Valley (EPA Reference T-4-1)

Dear Ms. Greene:

Enclosed is the response of Hawker Pacific Inc. to EPA's CERCLA § 104/RCRA § 3007 letter dated in February 1989, requesting information regarding the company's facility at 11310 Sherman Way, Sun Valley, California 91352. I spoke with you by telephone a few weeks ago and you agreed to an extension in submitting the document. It took slightly longer than I anticipated to get the documents ready due to my being out of my office part of the time.

As the response states, we are aware of no evidence indicating that Hawker Pacific's facility has had any release that could have contributed to the regional groundwater Please notify me if you have reason to believe problem. otherwise.

Michael A. Mohahan

of McCutchen, Black, Verleger & Shea

MAM/ph

RICHARD J. DENNEY
MICHAEL A. MONAHAN
LAURA J. CARROLL
McCUTCHEN, BLACK, VERLEGER & SHEA
600 Wilshire Boulevard
Los Angeles, California 90017
(213) 624-2400

Attorneys for HAWKER PACIFIC INC.

BEFORE THE
UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY

In re Hawker Pacific, Inc., )
facility at 11310 Sherman )
Way, Sun Valley, California; )
San Fernando Valley )
Groundwater Investigation )

EPA Reference T-4-1

TO REQUEST FOR INFORMATION

PURSUANT TO 42 U.S.C. § 9604(e)

# RESPONSE OF HAWKER PACIFIC INC. TO REQUEST FOR INFORMATION PURSUANT TO 42 U.S.C. § 9604(e)

This response is made by Hawker Pacific Inc. ("Hawker Pacific") to the request for information under 42 U.S.C. §§ 9604 and 6907 made by the United States Environmental Protection Agency ("EPA") by letter dated February 1989, addressed to Robert E. (Bob) Wilson, regarding Hawker Pacific's facility at 11310 Sherman Way, Sun Valley, California 91352. This response does not constitute any admission by Hawker Pacific that it has contributed to or is responsible for the San Fernando Valley groundwater contamination referred to in the EPA's request, and Hawker Pacific denies any such contribution or responsibility.

The following sets forth each question in the EPA request, followed by Hawker Pacific's response thereto.

1. A description of the purpose and operations of your facility including a detailed description of any hazardous waste storage, treatment, or disposal operations. Include the dates of operation.

## Response:

Hawker Pacific overhauls and repairs, and manufactures, aircraft landing gear and flight control equipment at this facility. It has conducted operations at the site since April 1, 1987, when it purchased assets for that purpose from Inchcape PLC. At that time, its facility included Buildings 1 through 4

(see Response to Request No. 3, below). In December 1987, its facility was expanded to include Building No. 5.

Hawker Pacific's operations at the site consist of receiving and inspection of material and equipment, machining and grinding, plating, painting, assembly and testing of new and reassembled equipment.

Operations at the site generate the following waste streams:

- 1. Plating shop wastes: (a) Plating shop production trash consisting of tape and masking materials is collected in steel drums. (b) Spent plating baths are periodically pumped out of the equipment and absorbent is added to it in steel drums. (c) Plating tank sludge also is periodically pumped out and absorbent is added in steel drums. (d) Plating operations rinse water is directed to a clarifier tank prior to discharge to the publicly owned treatment works ("POTW"). Clarifier sludge is periodically pumped out, and dewatered using an onsite press. The sludge is placed in steel drums, and the water is returned to the clarifier tank. Steel drums of all these plating shop wastes are hauled offsite to a permitted disposal site.
- 2. Several other types of miscellaneous liquid wastes are generated by the equipment used at the site: machinery waste oil, water soluble coolant from metal-working machinery, magnetic particle oil used for product testing, spent hydraulic fluids, degreasing solvents and paint thinners and solvent. These liquids are collected in steel drums and shipped offsite for recycling or disposal.

Steel drums in which the waste is accumulated are stored temporarily in a paved storage compound in the yard at the facility. These operations and waste streams have remained essentially the same since Hawker-Pacific began operations at the facility.

- 2. A detailed description of all hazardous substances and hazardous wastes that were or are used or produced in operation or in production-related processes at your facility(s). Of particular importance is your information regarding past and present chlorinated solvent usage including but not limited to carbon tetrachloride (CTC), trichloroethylene (TCE), and tetrachloroethylene (PCE). For each substance and each waste used or generated, provide the following information.
  - a. The common chemical name, specific chemical name, and chemical composition by volume for liquids and weight for solids;
  - b. The total amount, in gallons for liquids and tons for solids, or annual usage or generation;
  - c. The methods and processes used to generate, store, treat, and dispose of, and otherwise handle each substance;
  - d. When and where the above processes occurred and are occurring. Please specify dates and locations as precisely as possible. Location information should include, but not limited to, information pertaining to tanks, ponds, treatment facilities, and other units which were historically used to treat, store and/or dispose of hazardous substances but which may no longer exist.

## Response:

The following is a list of the hazardous materials used, stored, or produced at this site:

Liquid Wastes:
Shell Tellus Oil
Hydrocarbon Mixture 99%
55 Gallons a Year Usage
Used for lubricating machinery in the machine shop areas in
Buildings 1 and 2.
Disposed of by recycling off-site

Shell Garia Oil-CHydrocarbon Mixture 99%
50 gallons a year usage
Used for lubricating machinery in the machine shop areas in
Buildings 1 and 2
Recycled off-site

Trichloraethane
Trichloraethane 1.1.1. 100%
600 Gallons a Year Usage
Used for degreasing machined parts in the plating shop area in
Building 2
Recycled off-site

Red Oil
Hydraulic Fluid H-5606
Mixture 99% CAS# 64742-46-2, 64741-97-5, 64742-53-6
250 gallons a year usage
Used to fill and test hydraulic units before shipment, in the test room in Building 3
Disposed of by recycling off-site

Methylene Chloride
Methylene Chloride 100% CAS# 75-09-2
50 gallons a year usage
Used in assembly of the components in the assembly department in Building 3
Recycled off-site

Rho-Solv 1204
Rho-Solv 1204 100% CAS# 64742-89-8
1200 gallons a year usage
Used to clean parts and machinery in Buildings 2, 3 and 4
Recycled off-site

Mag-Oil-C
Deodorized Kerosene 96% Parafins, 2% Benzene
200 gallons a year usage
Used in magnetic particle inspection equipment in solvent tanks
in NDT (non-destructive testing) Department in Building 2
Recycled off-site

Rubbing Alcohol
Isopropyl Alcohol
60 gallons a year usage
Used to clean hydraulic equipment during assembly process in
Building 3
Recycled off-site

Chase 310
Lacquer Thinner 22% Toluene, 50% Ketone, 5% Glycolethers, 22% Petroleum Hydrocarbons
150 gallons usage
Used for cleaning parts to be painted, paint gun cleanup and thinning of paints in Building 4
Recycled off-site

MEK
Methyl Ethyl Ketone 100% CASE# 78-93-3
70 gallons a year usage
Used for cleaning parts in plating and assembly and test
departments in Buildings 2 and 3
Recycled off-site

Water Soluble Coolant
Waste Oil and Water
3000 gallons a year usage
Used for cooling during grinding and metal working in machine
shop areas in Buildings 1 and 2
Recycled off-site

#### Solid Wastes:

Cyanide/Cadmium Waste
3/4 cubic yards a year
Plating tank sludge, spent plating solution in plating shop in
Building 2
Land fill disposal

Nickel Waste
3/4 cubic yards a year
Plating tank sludge, spent plating solution in plating shop in
Building 2
Land fill disposal

Chromium Waste
7 cubic yards a year
Plating tank sludge, spent plating solution in plating shop in
Building 2
Recycled off-site

Metal Hydroxide Waste
2 cubic yards a year
Waste water treatment solids from the treating of metal finishing
rinse water
Recycled off-site

Oil and Grease Waste
3/4 cubic yards a year
Residue from oil product drums, from storage tank for water
soluble coolant in yard storage
Recycled off-site

#### Production Trash:

Masking Tape and Materials From Building 2 plating shop as described in response to request No. 1 above Land Fill Disposal

All of the materials referred to above are used in and handled by machinery, vessels, other equipment, piping or drums (both before and after becoming waste or recyclable materials) located above concrete or paved floors or pads so that any liquid leak or release would be promptly visible, with two exceptions: The plating waste water clarifier tank in Building 2 is partially below grade, and hydraulic fluid (red oil) and related compressor oil drips used for testing equipment are captured with compressor condensate water in two small sumps (approx. 18" x 18" x 18" each) located next to each other outside Building 3. A sample boring has been placed in the location of the plating clarifier. (See Response to Request No. 8.) The integrity of the two small sumps is and has been readily ascertained by visual inspection.

3. Any photographs, maps, diagrams regardless of their date, which show areas where hazardous substances or hazardous wastes have been made or may be located.

#### Response:

See enclosed facility diagram, document "A".

4. A description of past and present disposal practices of hazardous substances and hazardous wastes generated or used at your facility. If off-site disposal of wastes has occurred, please provide a detailed description, including copies of manifests of hazardous substances and hazardous wastes, the names and addresses of transporters that have ever been engaged for the purpose of transporting hazardous substances or hazardous wastes from your facility, and the location to where the waste was hauled.

#### Response:

See responses to Requests 1 and 2, above. Hawker
Pacific's past and present hazardous waste disposal practices
are: All hazardous substances for disposal are profiled (sampled
and analyzed), packaged and transported by an approved
transporter to a disposal site or recycler that is authorized to
accept that substance.

Enclosed are copies of manifests covering from 1987 to present date, document nos. HP000001 - HP000042.

Transporters used:

Disposal Control Inc. 1369 W. 9th Street Upland, CA 91786

King & King Drain Oil Service 635 Obispo Long Beach, CA 90814

Locations to which materials were hauled are shown on the manifests.

5. Locations and detailed descriptions of all monitoring wells, supply wells, injection wells, and underground tanks at your facility.

## Response:

One underground tank, which has not been used by Hawker Pacific, recently has been discovered at the back of Building 1,

between Buildings 1 and 2. (See diagram supplied in Response to Request No. 3.)

6. Is your facility(s) currently connected to a sewer line? If so, please identify the sewage system, date of connection, and types of wastes discharged. If you are or at some time operated your facility(s) without a sewer line connection, please identify the method of waste water disposal that you use or did use. Specifically, have you or are you using leach field(s), septic tank(s), or any other method of onsite disposal.

#### Response:

Site Buildings Nos. 1, 2, and 4 are connected to a POTW sewer line. Waste streams discharged into this sewer are biological waste, and plating rinse waters that have been pretreated as described in Response to Request No. 1, above. These sewer connections have been in place since Hawker Pacific began operations at these portions of the site in April 1987.

Buildings Nos. 3 and 5 are connected to septic tanks with leach lines. These have been in place since Hawker Pacific began operations at these portions of the site, in April and December 1987, respectively.

7. All analyses from sampling of monitoring and supply wells, underground tanks, soil samples, and soil-gas sampling conducted at your facility. Please include any reports written by consultant(s) about these sample analyses.

#### Response:

Pursuant to direction of the California Regional Water Quality Control Board, Los Angeles Region ("LARWQCB"), on December 1, 1988, Law Environmental Inc. performed a subsurface investigation at two locations on this site to determine if any

subsurface contamination to soil or ground water had occurred.

The report is produced herewith, document "B".

8. Are you or your consultants planning to perform any investigations of the soil, water (ground or surface), geology, geohydrology, or air quality on or about the site? If so, please describe the planned investigation(s).

#### Response:

Hawker Pacific has been requested by California
Regional Water Quality Control Board to perform an additional two
borings in the area of Building 3 and 5 to a depth of 40 feet as
well as two borings inside Building 2 to a depth of 10 feet.
Final results are not yet received. Air emissions testing was
conducted February 13, 1989 by Truesdail Labs to determine total
and hexavalent chrome from this facility's three hard chrome
plating tanks.

9. A list of all current and former employees, agents, contractors, consultants, company officers, and other personnel who may possess knowledge or information relevant to this inquiry. This list should include each individual's name, address, telephone number, and job title or function.

## Response:

<u>Name</u>	Address & Phone No.	<u>Title</u>	Term. Date
Erik Johnson	FX-6: Personal Privacy	Hazardous Wast Process Superv	
Harry Gunn	FX-6: Personal Privacy	Machine Shop S	upv.
Bud Bailes	FX-6: Personal Privacy	Plater Journey Lead	man/
Ed Conley	FX-6: Personal Privacy		

<u>Name</u>	Address & Phone No.	<u>Title</u>	Term. Date
Stan LaSalle	FX-6: Personal Privacy	EPA/Hazardous Waste Engineer	3-4-88
Lewis Augustir	FX-6: Personal Privacy	Supervisor Sr.	7-31-87

10. Length of time your company has been at the site location and any information you have regarding former occupants of this location and their hazardous waste practices.

## Response:

Hawker Pacific has occupied this site from April 1, 1987, except it has occupied Building 5 since December 1987. Prior operators at the site excluding Building 5, based on information and belief, were:

Inchcape PLC. 6-1-82 to 4-1-87
Parker Corp. Approx. 1980 to 6-1-82
Bertea Approx. 1979-1980
Zero Corporation Approx. 1977-1979
Canoga Industries Approx. 1968-1977
Stellar Hydraulics Approx. 1963-1969 (Buildings 1 and 2 only)

Some of these may not have occupied the entire site of Buildings 1 - 4.

The company occupying Building 5 immediately prior to Hawker Pacific was Laura Scudder. Hawker Pacific lacks information as to other prior occupants of Building 5.

11. Any information regarding use and disposal of chlorinated solvents by any person or business in the San Fernando Valley.

#### Response:

Hawker Pacific objects to this request as beyond the scope of EPA's authority. Without waiving this objection, Hawker Pacific produced herewith copies of manifests relating to prior operators at this location that Hawker Pacific possesses, as documents no. HP000043 - HP000128.

12. A descriptive list of all insurance policies held by your company. The description should include the dates during which each policy was in force, the general type of policy (e.g., comprehensive, general liability, automobile), the insurance company issuing the policy, the policy number, and any specific provision of the policy which may relate to claims for environmental damages.

#### Response:

See document entitled "Hawker Pacific Inc. Insurance Policy List, document "C", produced herewith in a separate envelope labelled as confidential information. This document and the information contained therein is confidential and subject to 40 C.F.R. § 2.203(b), and is to be so treated.

13. A detailed description of all hazardous substance and hazardous waste spills, leaks and incidents, as well as any clean-up actions undertaken during the history of your facility's operation.

#### Response:

No known spills, leaks or incidents during Hawker Pacific's operation at this location.

14. A list of the names and addresses of all solvent suppliers and solvent recyclers from which either products or services were acquired for use by your facility.

## Response:

Rho-Chem Corp P.O. Box 6021 H25-Isis Ave. Inglewood, CA 90301 Supplier and recycler

PRI

1835 E. 29th Street Signal Hill, CA Recycler

DeMenno-Kerdoon 2000 N. Alameda Street Compton, CA 90222 Recycler

Casmalia Resource Management Recycler NTU Road Casmalia, CA 93429

Shell Oil Co. 14117 Aetna Van Nuys, CA 91408 Supplier

Holchem Chemical 13546 Desmond Street Pacoima, CA 913131

Supplier

15. An audited set of financial statements which includes a Statement of Financial Position/Balance Sheet, Income Statement, and Statement of Changes in Working Capital, and any other supplementary information for your company's most recent fiscal year.

#### Response:

See financial statements, document "D", produced herewith in a separate envelope labelled as confidential information. This document and the information therein is confidential subject to 40 C.F.R.§ 2.203(b), and is to be so treated.

16. Are you owned by another corporate entity as a subsidiary, division, or otherwise?

## Response:

Yes. See document produced in response to Request No.

DATE: JULY 7, 1989

RICHARD J. DENNEY
MICHAEL A. MONAHAN
LAURA J. CARROLL
MCCUTCHEN, BLACK, VERLEGER & SHEA

Michael A. Monahan

Attorneys for HAWKER PACIFIC INC.

I, Robert E. Wilson, Vice President and General Manager of Hawker Pacific Inc. (the "Company"), directed employees under my supervision in a search for records in the possession of the company and in interviewing company employees with knowledge of the company's operations, chemical use and business practices, for purposes of preparing the responses to which this is attached. I believe that the search and interviews were diligent and, based thereon, that the factual responses to which this is attached are correct.

DATE: July 7, 1989

ROBERT E. WILSON

SUBSCRIBED AND SWORN TO BEFORE ME
THIS ID 4 DAY OF JULY 1989

NOTARY PUBLIC LA

OFFICIAL SEAL
LUIS E ZURITA
NOTARY PUBLIC - CALIFORNIA
LGC ANGELES COUNTY
LLV CLOTH, EXPIRES JAN 8, 1991

# 2166-01089 "A"

B CHEMICAL STORAGE SHED
C CHEMICAL STORAGE SHED
D WASTE OIL AND WATER STORAGE TANK
E FLAMMABLE LIQUID STORAGE SHED
F HAZARDOUS WASTE STAGING AREA
G COOLING TOWER
H SEPTIC TANKS

TRI I.I.I. STORAGE TANK

Α

- O PROPOSED FLAMMABLE LIQUID STORAGE AREA
- N PROPOSED CHEMICAL STORAGE SHED
- M PROPOSED CHEMICAL STORAGE SHED
- S BORING STIES DEC. 1, 1988



January 4, 1989

3420 N. SAN FERNANDO BLVD. SUITE 200 BURBANK, CALIFORNIA 91504 818-848-0214 PANAFAX 818-848-1674

Hawker Pacific, Inc. 11310 Sherman Way Sun Valley, California 91352

Project No. 58-8601 RWQCB File No. AB104.0436

Attention: Mr. Erik Johnson

Hazardous Waste Engineer

Gentlemen:

REPORT

Subsurface Investigation AB-1803 Follow-up Program

11310 Sherman Way

Sun Valley, California

## INTRODUCTION

Law Environmental, Inc. is pleased to submit this report of subsurface investigation at the above-referenced property. The investigation was requested by the Regional Water Quality Control Board (RWQCB) in their September 6, 1988 letter to Mr. Erik Johnson (Appendix A). This report addresses all elements of the required investigation which concern subsurface investigation and associated laboratory analysis (Items 2 and 4a). Other requirements of the September 6, 1988 letter are/will be addressed in documents provided to the RWQCB by Hawker Pacific.

Our professional services have been performed using that degree of care and skill customarily exercised under similar

circumstances by reputable consulting engineers and geologists practicing in this or equivalent localities. No other warranty, expressed or implied, is made as to the information or professional advice included in this report. This report has been prepared expressly for Hawker Pacific, Inc. to be used solely for the purposes of the required RWQCB AB-1803 investigation. The report has not been prepared for use by other parties and may not contain sufficient information for other parties or other uses.

All findings and conclusions derived from measurements or analyses of soil, water, air and/or gas are based on the conditions which existed only at those particular sample locations and the times of sampling. The analytical results reflect the range of accuracy and detection levels, when specified, for the particular analytical equipment and/or specific analytical method(s) used.

## FIELD INVESTIGATION

## <u>METHODS</u>

Our field investigation was conducted on December 1, 1988. Three soil borings were completed to a depth of 10 feet at the locations indicated on Plate 1, Site Map. Boring B-1 was drilled



approximately one foot from the berm surrounding the TCA tank at the rear of Building 2. Boring B-2 was drilled approximately two feet from the berm surrounding the waste oil tank. Boring B-3 was drilled within the drum storage area.

All borings were drilled using a truck-mounted hollow-stem auger with an outer diameter of eight inches. Undisturbed samples were collected and preserved in accordance with the Soil Sampling Protocol in Appendix B. Samples from each boring were monitored in the field for the presence of volatile organic compounds using a Foxboro OVA 108GC (OVA). This unit is calibrated to a methane standard and provides a direct readout with a sensitivity of about one part per million (ppm) for most fuel hydrocarbons and organic solvents. Nine soil samples (three from each boring) were transported to Brown and Caldwell Laboratories in Pasadena for analysis.

#### **GEOLOGY**

Up to one foot of fill soils consisting of silty sand to sandy silt were encountered in our borings. The fill was underlain by recent alluvium consisting of a light brown, medium to coarse-grained sand with a trace of silt. This sand persisted to the bottom of our borings. Details of the geology are shown on the boring logs included as Appendix C.



Previous work in this vicinity indicates that deeper materials at this location are generally characterized by coarse sands and gravels. Los Angeles County Flood Control District data suggest that the depth to ground water at this location is in excess of 150 feet.

## **OBSERVATIONS**

Ground water was not encountered in any of our borings. No visual or olfactory evidence of soil contamination was observed. No OVA readings were obtained from the borings which were in excess of background values.

## ANALYTICAL RESULTS

In accordance with RWQCB requirements, all analyses were performed by a State and EPA-certified laboratory. The laboratory report and associated chain-of-custody documents are included in Appendix D. Samples from depths of 1, 5 and 10 feet in each boring were analyzed discretely for volatile organic compounds by EPA Method 8240.

Only one compound, methylene chloride, was detected in the soil samples. A fairly uniform concentration, 5 to 16 parts per



billion (ppb), was identified in all 9 samples. Methylene chloride is a commonly used solvent in the laboratory. Brown and Caldwell Laboratories has determined that the reported methylene chloride concentrations are due to laboratory contamination. This is stated in the letter from Brown and Caldwell which follows the laboratory report. Even so, the levels detected are well below the Drinking Water Action Level of 40 ppb recommended by the State of California Department of Health Services (January 1987).

## **CONCLUSIONS**

Our investigation has not detected the presence of volatile organic compounds within the investigated areas of the subject property. The low levels of methylene chloride detected by the laboratory are believed to be the result of laboratory contamination.

-000-

One copy of this report should be submitted to the RWQCB by January 6, 1989. This extension was granted by Ms. Mila Sylvestre at the request of Law Environmental on December 21, 1988.



It has been a pleasure to have been of service to you on this project. If you have any questions regarding this report, please contact the undersigned.

Yours very truly,

LAW ENVIRONMENTAL, INC.

by Warre W. Dross Warren W. Gross Staff Hydrogeologist

Jack Carmody, Managez Environmental Assessment

Glenn A. Brown, C.E.G. 3 Senior Vice President

WG/gla/8601.RPT Attachments

(3 copies submitted)

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11260 SHERMANWY ALPHA OMEGA CAB.

DRIVEWAY

BASE MAP BY HAWKER PACIFIC NO SCALE PROVIDED

A FLAMMABLE LIQUID SHED

BORING LOCATION

AND NUMBER

B ASSEMBLY 4 TEST

A PAINT SHOP

3 PLATING

WASTE OIL TANK

MAP SITE



LAW ENVIRONMENTAL, INC.

## CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD— LOS ANGELES REGION

107 SOUTH BROADWAY, SUITE 4027 LOS ANGELES CALIFORNIA 90012-4596 (213) 620-4460



September 6, 1988

Mr. Erik Johnson Hazardous Waste Engineer HAWKER PACIFIC INC. 11310 Sherman Way Sun Valley, CA 91352

SUBSURFACE INVESTIGATION - AB1803 FOLLOW-UP PROGRAM (FILE NO. AB104.0436)

On August 31, 1988, your facility was inspected by Mila Silvestre and John Hostak of this Regional Board's staff. The inspection focused on past and present methods used for handling chemicals and wastes at your facility. During the site visit, the inspectors became aware of certain situations that may have resulted in soil and potential ground water contamination. Of primary concern are the areas listed below:

- A. Industrial Waste Clarifier System inside the Plating Shop, This clarifier receives solution overflow from the plating tanks. There is a 1,1,1-Trichloroethane (TCA) degreasing tank located within the plating area. Any spillage or leakage from this degreasing tank therefore gets mixed with the plating solution overflow and finally discharged into the industrial waste clarifier.
- B. Aboveground TCA Holding Tank Containment Area at the rear of the Plating Shop. This containment area is currently constructed to standards, i.e., with berms and concrete bottom. However, the area has been retrofitted only less than a year ago (per Mr. Erik Johnson). Prior to retrofitting, the condition of this area and the method of handling the solvent within this area are not known.
- C. Cooling Tower Area in front of the Hydraulic Test Room. At the time of inspection, there was ponded water on the concrete slab underneath the cooling tower. Blowdown from this cooling tower appears to be being discharged onto the ground through a discharge valve located at the bottom of the tower. Since the concrete slab is not bermed, the wastewater eventually flows down onto the asphaltic concrete. The discharge of wastes to land without waste discharge requirements fom the Regional Board is a violation of Section 13260 of the California Water Code. If said discharge has been occurring, you are hereby ordered to discontinue this unacceptable activity immediately.

D. Chemical and Waste Barrel Storage Area located between the Warehouse and the Paint Shop. There are signs of past chemical spillage in the asphaltic concrete throughout this area. Although there is a berm on the south side of this area, it does not provide adequate containment of spills and/or protection from surface runon or runoff.

The main objective of this Agency's AB1803 follow-up inspection program is to determine possible sources of contamination in nearby drinking water wells. This program is comprehensive since even small discharges may have significant additive effects on the quality of ground water in the area.

You are therefore directed to submit a workplan for conducting a subsurface investigation to determine whether infiltration of contaminants into soils has occurred at the two areas of concern.

Your workplan must incorporate the site specific requirements listed below and all of the items contained within the enclosed Workplan Requirements for Initial Subsurface Investigation.

- 1. Industrial Waste Clarifier Area. In order to initially determine the integrity of the industrial waste clarifier system, the entire unit must be evacuated to remove all sludge and waste waters, steam cleaned and then visually inspected for any cracks and/or leaks. Please notify my staff prior to the date you plan to commence this activity so we can schedule an inspector to be present. In addition, a sample of the sludge must be analyzed for pH, Metals, Volatile Organics, Total Oil and Grease, Flash Point, and any other analysis required to determine if this material must be handled as a hazardous waste.
- 2. TCA Holding Tank Area. A minimum of one (1) shallow test boring to a depth of 10 feet below land surface is required immediately adjacent to the TCA holding tank containment area to determine whether past solvent handling practices have affected subsurface conditions in that area. Samples shall be obtained at the 1-ft, 5-ft, and 10-ft depths.
- 3. Cooling Tower Area. A written report must be submitted to indicate your current method of disposing the blowdown water from your cooling tower. Also, a list of the water treatment chemicals being added to the cooling water must be provided in the report to determine the need for additional work in this area.

- 4. Chemical and Waste Barrel Storage Area. a) A minimum of two (2) shallow test borings to a depth of 10 feet below land surface is required in this area. Samples shall be obtained at the 1-ft, 5-ft, and 10-ft depths in each boring location. b) Retrofitting of this area is required to provide adequate containment of all barrels stored, to control any spills, and to preclude surface runoff waste from leaving the area. A retrofitting plan must be submitted to this Board for review and approval.
- 5. Finally, since your facility operates a private sewage disposal system onsite, the following information regarding this system must be provided:
  - a. location of the disposal system(s),
  - b. the type of system(s) operated,
  - c. materials of construction,
  - d. size and capacity of the unit(s),
  - e. aerial extent of any associated disposal fields,
  - f. types and quantities of wastes discharged,
  - g. number and locations of connections to the system(s), and
  - h. results of any analytical testing required for operations and maintenance. This information will be reviewed and a determination made regarding the need for any subsurface investigation in this area.

The workplan containing all of the information identified above is due to this Regional Board by October 31, 1988. Enclosed for your convenience is a list of consulting firms that may be able to assist you in conducting the subsurface investigation.

If you have any questions concerning this matter, please contact Mila Silvestre at (213) 620-4930.

Davida Bacharando.

DAVID A. BACHAROWSKI

Environmental Specialist IV

Enclosures

cc: Ms. Patti Cleary, U.S. EPA Region IX

Mr. Bill Jones, L. A. County, Dept. of Health Services

Mr. Publio Aliwalsa, City of Los Angeles Bureau of Sanitation

## SOIL SAMPLING PROTOCOL

The following procedures are followed when sampling soil with the hollow-stem auger drilling technique.

- Continuous flight, hollow-stem augers are used.
- 2. All augers, samplers and downhole equipment are steam cleaned prior to use and between borings. This minimizes the possibility of cross-contamination occurring.
- 3. A registered geologist or other appropriately trained personnel observes the drilling, visually logs the soils, and obtains soil samples at appropriate intervals (usually 5 feet) as determined by field conditions.
- 4. The Unified Soils Classification System (USCS) is utilized to classify the soils. Rocks are classified according to the Colorado School of Mines "Classification of Rocks."
- 5. The soil samples are obtained using a modified California split-spoon sampler, which accommodates two to six sample tubes. Various tubes are utilized to accommodate the different analyses required:

Brass Tubes: 2 1/2 by 3 or 6 inches - for all organics and general analyses, excluding copper and zinc.

Stainless Steel Tubes: 2 1/2 by 3 or 6 inches - for all organics and metals analyses excluding chrome and nickel.

- 6. The tubes are scrubbed with a brush and TSP or equivalent cleaning agent, then rinsed with tap water. If required, the tubes are steam cleaned. Tubes are given a final rinse with distilled water and delivered to the drilling site in closed buckets or equivalent to preclude recontamination.
- 7. After the sample tubes are removed from the sampler, the latter is completely disassembled and scrubbed in TSP or equivalent and tap water. The sampler is rinsed with tap water, and distilled water (if required) and reassembled with the required number of clean tubes.
- 8. Unclean tubes are washed with TSP or equivalent solution, rinsed with tap water, etc. as described in 6 above.
- 9. In loose soils, a sand catcher is used to prevent soil from falling out of the sampler.
- 10. The sampler is driven 12 or 18 inches at each sampling. Generally, the lowest tube is retained for analysis. The other tube or tubes are retained for split sampling or as a back-up.

- 11. The sample is logged in. After testing for the presence of combustible gases or volatile organic compounds, the sample is capped with Teflon liners and tight-fitting plastic caps to minimize leaching and cross-contamination. Black vinyl electrical tape is used to tightly secure the caps to the sample tube. The samples are labeled and preserved in clean ice chests containing Blue Ice or equivalent, to keep the samples at or about 4 degrees Celsius.
- 12. The samples are kept in the ice chest until delivered to a state and EPA certified testing laboratory, the same day if physically possible. The undelivered samples are stored or archived in secured Law Environmental sample storage at or about 4 degrees Celsius. A freezer is also available at Law Environmental if freezing samples is required or recommended.
- 13. All samples are accompanied by a chain-of-custody form, documenting the time, date, and person-in-charge since retrieval of the sample from the sampler.
- 14. In case of visual and/or olfactory evidence of contamination, soil cuttings are impounded in drums carrying cautionary labels. The drums are secured from random contact. Custody of the drums and their content will remain with the client at all times.
- 15. If chemical analysis of the soil indicates the presence of elevated levels of pollutants, then the Client will be informed of the test results and advised as to the lawful means of disposal or detoxification. Upon the written request and authorization by the Client, Law Environmental will organize the disposal or detoxification of the impounded soil in accordance with all applicable federal, state, county and local regulations.
- 16. The soil sample tube label includes:
  Job Number
  Boring Number and Depth
  Sampling Date
  Sampler's Initials
  Test to be Performed (if known at the time of sampling).
- 17. An indelible marking pen or a ball-point pen is used to mark the sample tubes.
- 18. A detailed log is kept of all field activities.



## BORING LOG

OWNER Hawker Pacific	PROJECT No. 58-860/
LOCATION 1/3/0 Sherman Way, Sun	Valley BORING No. 8-1
DRILLED BY Drill-Line	PAGE / of _ /
DRILLING METHOD Hollow Stem Auger	- DATE /2-/-88
SCREHOLE DEPTH /O feet BOREHOLE DIA	
A S S S S S S S S S S S S S S S S S S S	DESCRIPTION OF MATERIALS
	sphaltic Paving
AL FILL-SILTY	SAND/SANDY SILT - fine-grained, some clay, itly plastic, damp, medium brown.
	Thy plastic, damp, medium orown.
2 - SP SAND - medi	ium to coarse grained trace of silt, dry
3 - to d	com to coarse grained trace of silt, dry
5 -	
7 -	
8 -	
9 -	
1 -	
2	
3 -	
4 -	
5 -	
6 -	
7	
Remarks:	
End borin	et ten feet. Ground Woter not
9 - encounter	discoloration. No unusual adors
interral (	
sampled interval	



## BORING LOG

OWNER Ho	awker Pa	acific	PROJECT No. <u>58-860/</u>
LOCATION /	1310 Sherr		BORING No. 8-2
DRILLED BY			PAGE / of /
DRILLING METH	00 Hollow	_	DATE /2-/-88
BOREHOLE DEPT	H <u>/O</u> fe	et BOREHOLE DIA. 8 inches	LOGGED BY MM
1 0 S		DESCRIPTION OF MA	
	SA		
	· · SF	medium brown	rained, Trace Clay, damp
2 -	<b>A</b>	1 1	
3 -		5AND - medium to coarse gi	ight brown.
4 -	'-		
5 —	3		
6 -			
7 -			
8 -			
9 -	• . :		
0 -	<b>4</b>		
1 -			
2			
3			
4			
5 -			
6			
7 -			
8 -		Remarks:	
		End boring at ten feet. Gi	round Water not
9 -	_	encountered. No Caving. or soil discoloration.	No unusual adors
interval sampled	interval		



## BORING LOG

OWNER Hawker Pacific	PROJECT No. 58-860/
LOCATION 1/3/0 Sherman Way, Sun Valley	BORING No. 8-3
	PAGE / of /
DRILLING METHOD Hollow Stem Auger	DATE 12-1-88
BOREHOLE DEPTH /O feet BOREHOLE DIA. 8 inches	
DESCRIPTION OF MA  DESCRIPTION OF MA  DESCRIPTION OF MA  2" Asphaltic Paving  SP  SAND - medium to Coarse  to maist - maisture incu  light brown.	TERIALS  arained, trace silt damp
8 -	
9	
	į
3	
5 -	
5 -	1
Remarks:  End boring at ten feet. G	round Water not
encountered. No Caving. or soil discoloration.	No unusual adors
o - interval sampled interval	



## **BROWN AND CALDWELL LABORATORIES**

## **ANALYTICAL REPORT**

373 SOUTH FAIR OAKS AVENUE, PASADENA, CA 91105 (818) 795-7553 (213) 681-4655

FAX: (818) 795-8579

LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

Project: 58-8601

## REPORT OF ANALYTICAL RESULTS

Page 1

LOG NO	SAMPLE DESCRIPTION,	SOIL SAMPL	ES		DA	TE SAMPLED
	B-1 1' B-1 5' B-1 10' B-2 1' B-2 5'					01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER	***************	12-019-1	12-019-2	12-019-3	12-019-4	12-019-5
Date Extraction Filtrical Dilution Filtrical Diluti	l. (EPA-8240)  cted actor, Times l  nloroethane, ug/kg trachloroethane, ug/k nloroethane, ug/kg	12/06/88 1 <5 g <5 <5	12/06/88 1 <5 <5 <5 <5	12/06/88 1 <5 <5 <5 <5	12/06/88 1 <5 <5 <5 <5	12/06/88 1 <5 <5 <5 <5
1,1-Dichlor 1,2-Dichlor 1,2-Dichlor 1,2-Dichlor	coethylene, ug/kg coethane, ug/kg cobenzene, ug/kg copropane, ug/kg cobenzene, ug/kg	\cdot	\(\frac{\cup_{\cip}}\cup_{\cip}}\cup_{\cip}}\cup_{\cip}\cup_{\cip}\cip}\cup_{\cip}\cip_{\cip}\cip}\cip}\cip}\cup}\cip}\cup}\cip\cip}\cip\cip}\cip\cip}\cip\cip}\cip\cip}\cip\cip}\cip\cip}\cip}	45 45 45 45 45 45	ও ও ও ও	(5 (5 (5 (5 (5
cis-1,3-Dic 1,4-Dichlor 2-Chloroeth 2-Hexanone,	chloropropene, ug/kg cobenzene, ug/kg cylvinylether, ug/kg ug/kg	ও ও ও	ও ও ও	(১ (১ (১	ও ও ও	<5 <5 <5 <5
Acetone, ug Acrolein, u Acrylonitri Bromodichlo Bromomethan	g/kg le, ug/kg romethane, ug/kg	<50 <50 <50 <5 <5	<50 <50 <50 <5 <5	<50 <50 <50 <5 <5	<50 <50 <50 <5 <5	<50 <50 <50 <5 <5



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REPORT OF ANALYTICAL RESULTS Page 2						Page 2
LOG NO	SAMPLE DESCRIPTION,	SOIL SAMPL	ES		DA	ATE SAMPLED
12-019-1 12-019-2 12-019-3 12-019-4 12-019-5	B-1 10' B-2 1'				**********	01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER		12-019-1	12-019-2	12-019-3	12-019-4	12-019-5
Chloroethan Bromoform, Chloroform, Chlorometha Carbon Disu Dibromochlo Bthylbenzen Freon 113, Methyl Isobo Methyl Ethyl Methylene Ch Tetrachloroeth Styrene, ug/ Trichloroeth	ene, ug/kg cachloride, ug/kg cachloride, ug/kg ug/kg ug/kg ug/kg ne, ug/kg lfide, ug/kg romethane, ug/kg e, ug/kg utyl Ketone, ug/kg loride, ug/kg ethylene, ug/kg ethylene, ug/kg cylene, ug/kg		ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ	\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	\ \ \ \ \ \ \ \ \ \ \ \ \ \	\$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$
	, ug/kg	<5	<5	<5	<5	<5



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						•
LOG NO	SAMPLE DESCRIPTION, SO	IL SAMPL	ES		DA	TE SAMPLED
12-019-1 12-019-2 12-019-3 12-019-4 12-019-5	B-1 1' B-1 5' B-1 10' B-2 1' B-2 5'	• • • • • • • • • • • • • • • • • • • •				01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER	12	2-019-1	12-019-2	12-019-3	12-019-4	12-019-5
trans-1,2-	ne Isomers, ug/kg Dichloroethylene, ug/kg Dichloropropene, ug/kg	<50 <5 <5	<50 <5 <5	<50 <5 <5	<50 <5 <5	<50 <5 <5



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## REPORT OF ANALYTICAL RESULTS

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LOG NO	SAMPLE DESCRIPTION, SOIL S	AMPLES		DA	TE SAMPLED
12-019-6	B-2 10'	*****			01 DEC 88
12-019-7	B-3,1'				01 DEC 88
12-019-8	B-3 5'				01 DEC 88
12-019-9	B-3 10'				01 DEC 88
PARAMETER		12-019-6	12-019-7	12-019-8	12-019-9
Vol.Pri.Pol	1. (EPA-8240)				
Date Extra	cted	12/06/88	12/06/88	12/07/88	12/07/88
Dilution F.	actor, Times 1	1	1	1	1
l,l,l-Tric	hloroethane, ug/kg	<5	<5	<b>&lt;</b> 5	<5
1,1,2,2-Te	trachloroethane, ug/kg	<5	<5	<5	<5
1,1,2-Tric	hloroethane, ug/kg	<5	<5	<5	<5
1,1-Dichlor	roethane, ug/kg	<5	<5	<5	<5
1,1-D1CD101	roethylene, ug/kg	<5	<5	<5	<5
1,2-9100101	roethane, ug/kg	<5	<5	<5	<5
1,2-0100101	robenzene, ug/kg	<5	<5	<5	<5
1,2-Dichion	copropane, ug/kg	<5	<5	<5	<5
1,3-DICTION	cobenzene, ug/kg	<5	<5	<5	<5
1 4-Diable	chloropropene, ug/kg	<5	<5	<5	<5
2-Chlorooth	obenzene, ug/kg	<5	<5	<5	<5
2-Heranona	nylvinylether, ug/kg	<5	<5	<5	<5
2-Hexanone, Acetone, ug	ug/kg	<5	<5	<5	<5
Acrolein, u	/ Kg	<50	<50	<50	<50
Acrylonitri	la va/ka	<50	<50	<50	<50
Browndichla	romethane, ug/kg	<50	<50	<50	<50
Bromomethan	a ug/kg	<b>&lt;</b> 5	<5 .5	<5	<5
Benzene, ug	c, ug/kg /ka	<5	<5 	<b>&lt;</b> 5	<5
	, v2	<5	<5	<5	<5





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LOG NO	SAMPLE DESCRIPTION, SOIL S	AMPLES		DA	TE SAMPLED
	B-2 10' B-3 1' B-3 5' B-3 10'				01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER		12-019-6	12-019-7	12-019-8	12-019-9
Chloroetha Bromoform, Chloroform Chlorometh Carbon Dis Dibromochl Ethylbenze Freon 113, Methyl Iso Methyl Eth	rachloride, ug/kg ne, ug/kg ug/kg , ug/kg ane, ug/kg ulfide, ug/kg oromethane, ug/kg ne, ug/kg			ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ	<5 <5 <5 <5 <5 <5 7
Tetrachlore Styrene, us Trichloroe Trichlorof	oethylene, ug/kg g/kg thylene, ug/kg luoromethane, ug/kg	<5 <5 <5 <5	<5 <5 <5 <5	ও ও ও	<5 <5 <5 <5
Toluene, up Vinyl Aceta Vinyl Chlos Total Xyles	g/kg	<5 <50 <5 <50 <5	<5 <50 <5 <50 <5	<5 <50 <5 <50 <5	<5 <50 <5 <50 <5



# BROWN AND CALDWELL LABORATORIES

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	REPORT OF ANALYTICAL RESULTS	Page 6
LOG NO	SAMPLE DESCRIPTION, SOIL SAMPLES	DATE SAMPLED
12-019-6 12-019-7 12-019-8 12-019-9	B-2 10' B-3 1' B-3 5' B-3 10'	01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88

PARAMETER 12-019-6 12-019-7 12-019-8 12-019-9 trans-1,3-Dichloropropene, ug/kg <5 <5 <5



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LOG NO		DATE SAMPLED
12-019-10	B-1 1' BC/QC SPK	01 DEC 88
PARAMETER	12-019-10	
Date Extr Dilution 1,1-Dichl Benzene, Chloroben Trichloro Toluene,	## 11. (EPA-8240) Facted	
Other Vo	ol.Pri.Poll. (EPA-8240)	



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Project: 58-8601

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LOG NO	SAMPLE DESCRIPTION, SOIL SAMPLES		DATE SAMPLED
12-019-11	B-1 1' BC/QC DUP-SPK		01 DEC 88
PARAMETER		12-019-11	
Date Extra Dilution F. 1,1-Dichlo Benzene, Pc Chlorobenze Trichloroe Toluene, Pe	actor, Times 1 roethylene, Percent ercent ene, Percent thylene. Percent	12/06/88 1 130 110 110 90 110	······································



Chloroethane, Percent

## **BROWN AND CALDWELL LABORATORIES**

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LOG NO: P88-12-019

Reported: 09 DEC 88

Received: 01 DEC 88

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### REPORT OF ANALYTICAL RESULTS

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LOG NO	SAMPLE DESCRIPTION, NON-SALINE	WATER SAMPLES	DATE SAMPLED
12-019-12	Laboratory Control Standard		
PARAMETER		12-019-12	
Vol.Pri.Pol Date Extra Dilution F 1,1,1-Tric 1,1,2,2-Te	ll. (EPA-8240) acted Factor, Times l chloroethane, Percent etrachloroethane, Percent	12/06/88 1 95 75	
1,1-Dichlo 1,1-Dichlo 1,2-Dichlo	chloroethane, Percent proethane, Percent proethylene, Percent proethane, Percent	110 95 90 95	
1,2-Dichlo	orobenzene, Percent oropropane, Percent orobenzene, Percent ochloropropene, Percent	100 90 100 80	
1,4-Dichlo	robenzene, Percent hylvinylether, Percent	100 90 105	
	Percent ile, Percent	85 69 71	
Bromometha Benzene, P		95 160 90	
	ene, Percent rachloride, Percent	100 90	

90



## **ANALYTICAL REPORT**

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	REPOR	OF ANALYTICAL RESULTS Page 10
LOG NO	SAMPLE DESCRIPTION, N	ON-SALINE WATER SAMPLES DATE SAMPLED
12-019-12	Laboratory Control St	
PARAMETER		12-019-12
Bromoform, Chloroform, Chlorometha Carbon Disu Dibromochlo Ethylbenzen Freon 113, Methyl Isob Methyl Ethy Methylene C Tetrachloro Styrene, Pe Trichloroet	Percent Percent Ine, Percent Ifide, Percent Percent Percent It Ketone, Percent It Ketone, Percent Ithoride, Percent ethylene, Percent rcent hylene, Percent	75 100 80 80 95 90 85 95 110 75 85 90
Trichlorofl Toluene, Pe Vinyl Aceta	uoromethane, Percent rcent	65 80 55
Vinyl Chlor Total Xylend trans-1,2-D	ide, Percent e Isomers, Percent ichloroethylene, Perce ichloropropene, Percen	205 88 80



## ANALYTICAL REPORT

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#### REPORT OF ANALYTICAL RESULTS

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LOG NO	SAMPLE DESCRIPTION, BL	ANK WATER SAMPLES	DATE SAMPLED
	Reagent Blank		
PARAMETER		12-019-13	
Vol.Pri.Pol Date Extra	1. (EPA-8240)	12/06/88	
1,1,1-Tric	actor, Times l hloroethane, ug/L	1 <5	·
1,1,2-Tric	trachloroethane, ug/L hloroethane, ug/L	<5 <5	
1,1-Dichlo	roethane, ug/L roethylene, ug/L	<5 <5	
1,2-Dichlo	roethane, ug/L robenzene, ug/L	<5 <5	
1,3-Dichlor	ropropane, ug/L robenzene, ug/L chloropropene, ug/L	\ ১ ১	
1,4-Dichlor	robenzene, ug/L hylvinylether, ug/L	্ হ হ	
2-Hexanone,	, ug/L	<s <50<="" td=""><td></td></s>	
Acrolein, i	ıg/L	<50 <50	
Bromodichlo Bromomethar	Promethane, ug/L ne, ug/L	<5 <5	
Benzene, ug Chlorobenze	ene, ug/L	<5 <5	
Carbon Tetr Chloroethan	cachloride, ug/L ne, ug/L	<5 <5	



#### **ANALYTICAL REPORT**

373 SOUTH FAIR OAKS AVENUE, PASADENA, CA 91105 (818) 795-7553 (213) 681-4655

FAX: (818) 795-8579

LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

Project: 58-8601

Page 12

			•
LOG NO S	AMPLE DESCRIPTION, BLAN	IK WATER SAMPLES	DATE SAMPLED
12-019-13 R			
PARAMETER		12-019	
Ethylbenzene Freon 113, ug Methyl Isobus Methyl Ethyl Methylene Chl Tetrachloroethy Trichloroethy Trichlorofluc Toluene, ug/I Vinyl Acetate Vinyl Chlorid Total Xylene trans-1,2-Dic	g/L ug/L e, ug/L fide, ug/L omethane, ug/L , ug/L g/L tyl Ketone, ug/L ketone, ug/L loride, ug/L thylene, ug/L cromethane, ug/L e, ug/L le, ug/L Isomers, ug/L chloroethylene, ug/L	•	ত ত ত ত ত ত ত ত ত ত ত ত ত ত
trans-1,3-Dic	hloropropene, ug/L		<b>45</b>

REPORT OF ANALYTICAL RESULTS

Laboratory Manager

373 SOUTH FAIR OAKS AVENUE PASACENA CA 91105 \* (818) 795-7553

January 3, 1989

Mr. Warren Gross
Law Environmental
3420 North San Fernando Road, Suite 200
Burbank, California 91504

Project: 58-8601

Subject: Methylene Chloride Contamination in the Laboratory

Dear Mr. Gross:

As we discussed with the low-level 8240 analyses for Brown and Caldwell Laboratories log number P88-12-019, methylene chloride is a common laboratory contaminant used in several organic sample preparation, including Methods 625 and 608. Although we take special precautions to isolate the use of methylene chloride, we cannot eliminate this compound entirely from the laboratory atmosphere. The levels of methylene chloride vary, not only from day to day, but also from morning to evening, depending upon the type of sample preparation activity taking place in the laboratory. We typically see between 2 and 10 ug/L methylene chloride in our laboratory blanks.

We reported a blank value of 9 ug/L methylene chloride with your report. The sample values ranged from 6 to 16 ug/kg methylene chloride. This is laboratory contamination and this variance is within reason.

Should you have any questions, please do not hesitate to call us.

Very truly yours,

BROWN AND CALDWELL

Jane Freemyer/

Client Services Manager

JF:lah

LAW ENVIRONMENTAL, INC.

3420 M. San Fernando Blvd. Suite 200 Burbark, California 91504 (618) 646-0214

# RECORD CUSTODY 0 F CHAIN

Citant Name				Lab Log Mumber 688-12-019
	AND ENVIRONMENTAL	MENTAL Project Number 58-8601		Analyses Required
HA	ANKER RELEIG			
مدرهمداصا	recent Ge	1955 Sampled by MARK MILLED		
Number Sampled S	Sampled Type*	Sample Description	Number of	Remarks
12/1/88	05		7	$\frac{1}{1}$
7		8-145'	-	TO THE PARTY OF TH
3		8-1010		PECTION (AMITS
4		8-701		7 (7 (2 -10 (10 ))
5		8-205	2	
9		R-2. @ 10	7	WENTE UNITAL
7		8-30	7	DOWNENTS.
8		8-3@51		
<b>*</b>	<b>→</b>	8-3@10'	2	
	Sign	Signature	ŭ	Company Date Iline

Signature	Company	Dete	3
Relinquished by		,	
Received by	CAM LANIGONMENTAL	12/1/98	1: 25 011
11.2 Term	R/0/	121.100	121.100 -3-6
Relinquished by	30.30	VX/);	4 >> MM
Received by			
4			
Relinquished by			
Received by			
NOTE: Samples are discarded 30 days after seculos			
THE REPORT OF THE PARTY OF THE			

\*AQ - Aqueous; NA - Monaqueous; St - Siudge; GV - Ground Water; SQ - Soil; PE - Petroleun; OI - Other Samples are discarded 30 days after results are reported, unless other arrangements are made. Hazardous samples will be returned to client or disposed of at client expense.

riealth and Welfare Agency MB No. 2050—0039 (Expires 9-30-88) 2166-01089 Toxic Sub-tences Control Div r type. (Form designed for use on elite (12-pitch typewriter) 1. Generator's US EPA ID UNIFORM HAZARDOUS Information in the shaded areas WASTE MANIFEST CA D00064625 is not required by Federal law. 3. Generator Name and Mailing Address ifest Document Number Service Acce ssorv 87646<u>468</u> B. State Generator's ID C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address US EPA ID Number G. State Facility's ID 1835 E. 29th ST. 13. Total 11. US DOT Sescription (Including Proper Shipping Name, Hazard Class, and ID Number) Quantity Unit Waste No. Туре No. Wt/Vol Combustable Liquid

LASte oil + Water N.O.S NA 1270 State EPA/Other NERAT State EPA/Other 0 J. Additional Descriptions for Materials Listed Above Rubber Gloves + Safety Glasses GENERATOR'S: CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Month Day Year Signatu 17. Transporter 1 Acknowledgement of Receipt of Materials 041289 Printed/Typed Name Signature 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space

HP 000001

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

G

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

UNIFORM HAZARDOUS	enerator's US EPA ID No.	Manifest Document No.	2. Page 1	Informe	tion in the shaded
WASTE MANIFEST (')	1760064625	Document No.	/ 01/		equired by Federal
3. Generator's Name and Mailing Address F11 A F F C C Say	Carlot Maria		A. State Man	itest Docum	ent Number
HI HOLD A CONTROL OF THE PARTY	The state of the s		B. State Gen	1045	407
4. Generator's Phone (2/2) 7 5-4.		ک	HA AH	936	01212101618
5. Transporter 1 Company Name	6. US EPA ID I		C. State Tran	sporter's ID	
RING + RINK IL	1 P 1 9 8 1 4	423720	D. Transporte	r's Phone	
7. Transporter 2 Company Name	8. US EPA ID I	lumber	E. State Tran	sporter's ID	
	1 1 1 1 1 1	1 1 1 1	F. Transporte	r's Phone	
9. Designated Facility Name and Site Address	10. US EPA ID N	lumber	G. State Fac	lity's ID	
•					
319 Had Ca.	01700		H. Facility's F	hone	
	10,2,7,09,010			···	
11. US DOT Description (Including Proper Shipping	Name, Hazard Class, and ID Number)	12. Conta		Total Quantity	14. I. Unit Waste
, , , , , , , , , , , , , , , , , , , ,		No.	Туре		Wt/Vol
· Combustable Liquit	>	j			State 2
GASE 1684 FOIL N	CS. NA 1776		- TI	900	
	- , , ,	<u> </u>	TTOIS	$\Pi_{\mathbf{k},\mathbf{l}_{\mathbf{k}}}$	
b.					State
					EPA/Other
C. *					Cons
					State
•					EPA/Other
d.					State
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					EPA/Other
			C.	,	d.
4 <sub>1</sub> × 1					
15. Special Handling Instructions and Additional Info	rmation				
15. Special Handling Instructions and Additional Info	mation Color -				
16.  GENERATOR'S CERTIFICATION: I hereby doname and are classified, packed, marked, an international and national government regulations are alarge quantity generator, I certify the determined to be economically practicable a me which minimizes the present and future the faith effort to minimize my waste generation a	eclare that the contents of this consind labeled, and are in all respects it ons.  at I have a program in place to reduct that I have selected the practical threat to human health and the environment to human health and the	n proper condition to the the volume and to ble method of treat tonment; OR, if I am	for transport b oxicity of wast tment, storage a small quanti	y highway e generate , or dispos ty generato	according to applicate to the degree I have all currently availables. I have made a go
16.  GENERATOR'S CERTIFICATION: I hereby do name and are classified, packed, marked, at international and national government regulations of the seconomical practicable as me which minimizes the present and future the faith effort to minimize my waste generation as	eclare that the contents of this consind labeled, and are in all respects it ons.  at I have a program in place to reduct that I have selected the practical threat to human health and the environment to human health and the	n proper condition to the the volume and to ble method of treat tonment; OR, if I am	for transport b oxicity of wast tment, storage a small quanti	y highway e generate , or dispos ty generato	according to applicate to the degree I have all currently availables. I have made a go
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EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

1	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Pa	intorn	nation in	
3. (	Generator's Name and Mailing Address	CADDODGGGGAZA	7	A State	Manifest Doc	required	-
_	P/ * . /	.c.n.i.		A. Giaio	8764	2	Ê
4. 6	Generator's Phone (CIS) 7	Service Way 5d Ville , Go. 6201 91	*	1 .	Generator's II		<u> </u>
5. T	Transporter 1 Company Name	6. US EPA ID N	umber	C. State	Transporter's	1D	21016
L	ing + King oil	1 C A D G 8 1 4	1215131210	D. Trans	porter's Phone	(213)	479 /
7. T	Fransporter 2 Company same	8. US EPA ID N	umber		rransporter s	טו	
- F	Designated Facility Name and Site Addre	1		<del> </del>	porter's Phone	•	
1	$RI$ 1835 $E \cdot 29$		umber	1	Facility's ID	99/1	1103
:	SigNAL Hill , Ca.	_		1	•		
-		16/17/01/10/0	12. Conta	12/3			54
11.	US DOT Description (Including Proper S	hipping Name, Hazard Class, and ID Number)	12. Conta	Type	13. Total Quantity	14. Unit Wt/Voi	Wa
	Combustable Lig						State
4	VASte oil + W	Afer NOS. NA 127	o gal	1110	1/29	OG	EPA/Oti
B.							State
		A STATE OF THE STA					EPA/Oth
C.		<b>1</b>					State
							EPA/Oth
d.							State
				. ]			EPA/Oth
1	Special Handling Instructions and Additio 2いわかな こんいら	and Information  54 Feb. Gogy/es					
n ir d d	name and are classified, packed, mainternational and national government in I I am a large quantity generator, I ce determined to be economically praction me which minimizes the present and f	ereby declare that the contents of this consigned, and labeled, and are in all respects in regulations.  Trify that I have a program in place to reduce the practicable and that I have selected the practicabuture threat to human health and the environtation and select the best waste management	the volume and to le method of treat ment: OR if I am	or transpo exicity of v ment, stor	waste genera generates or disposantity generates	y accordi	ng to ap degree ntly avai
Printe	ed/Typed Name	Signature		7/		N	lonth Da
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Printe		Signature	0				onth Da
	autonia l'anti-			10.40			
1	ransporter 2 Acknowledgement of Recei	pt of Materials	44	), -C			<u> </u>
√8. f	والمراجع والمراجع والمناجع والمناجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع	pt of Materials Signature		<i>),</i> -c		м	onth Da
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19. Di	ransporter 2 Acknowledgement of Received/Typed Name Discrepancy Indication Space acility Owner or Operator Certification of	Signature receipt of hazardous materials covered by this re	manifest except as	noted in Ite	ım 19.	1	0000
19. Di	ransporter 2 Acknowledgement of Hecel ed/Typed Name discrepancy Indication Space	Signature	manifest except as	noted in Ite	ım 19.	HP	<u>                                     </u>

	4	UNIFORM HAZARDOUS WASTE MANIFEST  Generator's US EPA ID A D 0 0 6	46257	Anifest cument No.	2.	Page 1 of	Intorma		the shaded areas by Federal law.
		H310 Shirman way Sun Valley,	4 91252		A. St	ate Man	755	335	2 -
	l	4. Generator's Phone (818) 765 -6201	·		B. St	ate Gen	fQ3C	02	2006
		5. Transporter 1 Company Name 6. 7. Transported Company Name 8.	US EPA ID Number 10,9,8,1,4,2,3	3,2,0	C. St	ate Trar	nsporter's K er's Phone	213)	137-6500
		7. Transported Company Name 8.	US EPA ID Number	- L	E. St	ate Tran	sporter's IC	)	
		9. Designated Facility Name and Site Address 10.	US EPA ID Number		1		er's Phone		21 - 1
		PRI 1835 E 27 57.			H. Es	cility's	Phone -		7)50 1111
		1C1A1	0,9,0,0,1,1	10,5,9	(0	777	129	5-6	5577
		11. US DOT Description (Including Proper Shipping Name, Hazard Class,	and ID Number)	12. Conta		13	. Total Quantity	14. Unit Wt/Vol	I. Waste No.
	• G	* Cembustable Liquio							State Z/
	Ë N	EVASE OIL + WATER NOS NA 1	270	OICIL	17,7	00	18/5/0	5	EPA/Other
	E	b. <b>6</b>					11		State
	A T			1 1			1 1 1		EPA/Other
1	Ř	[ c.							State
				1 1			1 1 1		EPA/Other
		d.					1.1.1.		State
	l								EPA/Other
		J. Additional Descriptions for Materials Listed Above			K. Ha	ndling C	odes for W	astes Lis	sted Above
		Wash oil + water			·R	01	-	b.	
				S	C.			d.	
		15. Special Handling Instructions and Additional Information	-			1	L		· · · · · · · · · · · · · · · · · · ·
		Rubber Gloves + Safety Go	2 ass cs.						
		16. GENERATOR'S CERTIFICATION: I hereby declare that the contename and are classified, packed, marked, and labeled, and are	ents of this consignment in all respects in proper	are fully an	d accur	ately d	escribed a	bove by	proper shipping
		intermational and national government regulations.  If I am a large quantity generator, I certify that I have a program i							
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			Signatura		2 /				fonth Day Year
Y		Jesse Cabrera	Usse		1-	in	~	ĺ	03199817
R		17. Transporter 1 Acknowledgement of Receipt of Materials							
* N S P O		Printed/Typed Name  1. CAKENCIDA ARREAN	Signature	. 0	e 			٠	Nonth Day Year
P	1	18. Transporter 2 Acknowledgement of Receipt of Materials	g. snapers		LA				PIDIOI
R T E		Printed/Typed Name	Signature						onth Day Year
Ř	+	19. Discrepancy Indication Space				·.			
F A C									
Ĭ			~	-				12	IP 000004
Ī	-	20. Facility Owner or Operator Certification of receipt of hazardous material	is covered by this manifes	t except as	noted i	n Item 1	9.		000004
Ÿ		Printed/Typed Name	Signature	. 1	V		/		onth Day Year
		Druges		1	مردد	<u></u>			13/18/15/15

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

DHS 8022 A (1/88)

Do Not Write Below This Line

nint or type. (Form designed for use on elite (12-pitch typewriter).	0108			Toxic Sub	Sacramento,
UNIFORM HAZARDOUS WASTE MANIFEST  1. Generator's US EPA ID No.  CAPCOCA62576	Manifest courant No.	٥	f is no	t required	the shaded ar by Federal la
3. Generator's Name and Mailing Address		A. Stat	e Menidest Do	•	
THAT SHEENIAN WAY, OUR VALUE	YCA	B. Stat	e Generator's		
4. Generator's Phone (213 - 275 29 30 - 51 05	· <u> </u>		L HQ3		40,66
5. Transporter 1 Company Name 6. US EPA ID Number 1 CILCAD 96 1 44	3,32.0				439 8
7. Transporter 2 Company Name 8. US EPA ID Number			e Transporter		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		F. Tran	nsporter's Pho	ie	
9. Designated Facility Name and Site Address 10. US EPA ID Number			te Facility's ID		
SIGNAL HILL, CA CATGEGOIL			ility's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	No.	Type	13. Total Quantity	Wt/Vo	1
· WASTE WATER & CIL	001	T-1.		9	State 22
			7450	15	EPA/Other
b.					State
		•	1 1 1	.	EPA/Other
c.		1		<u> </u>	State
			1 1 1		EPA/Other
d.					State
u.					EPA/Other
4. Marrials Listed Above		K, Hai	ndling Codes fo	or Wastes L	isted Above
J. Additional Descriptions for Materials Listed Above		a.		<b>b</b> .	
		C.		đ.	• .
		<u> </u>			
15. Special Handling Instructions and Additional Information  KUBLEH GLOVES, SHFETY GLA	4555	5.			
16.  GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignme name and are classified, packed, marked, and labeled, and are in all respects in pro	ent are fully ar	d accur for trai	rately describ asport by high	ed above b way accor	by proper shipp ding to applica
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Printed/Typed Name	Signature Signature	Asilia	Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials			
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19. Discrepancy Indication Space			

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Month Day Year

DHS 8022 A (1/87)

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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete

Printed/Typed Name

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

Signature

(Form designed for use on elite (12-pitch typewriter).					Sacramento, Cali
WASTE MANIFEST	Manifest ocument No.	2. Pa of	.   11810		the shaded areas by Federal law.
3. Generator's Name and Mailing Address		A. State	Manifest Do		
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11310 SULFINING SAY SOMERLEY CA. 4. Generator's Phone (2/2) 275-2755		B. State	Generator's	12/2	371
5. Transporter 1 Company Name 6. US EPA ID Number	- 4	1	Transporter		34200
KINE EVINE TO 17 ELLEVILLE		<u> </u>	porter's Pho		457 3 6
7. Transporter 2 Company Name 8. US EPA ID Number			Transporter porter's Pho		
9 Designated Facility Name and Site Address 10. US EPA ID Number		<del>}</del>	Facility's ID		
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SIGNAL WILL CA CATETION	12. Conte		13. Total	14.	T T
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	No.	Туре	Quantit		Waste No.
· WASTE WATER AND CIL MOS NA.			_		State 22/
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WASTE MIL AND WATER	<u> </u>	* R	ing Codes fo	b.	
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DHS 8022 A (1/87)

EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

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YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

DHS 8022 A (1/87)

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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

Printed/Typed Name

YELLOW: GENERATOR RETAINS

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Signature

INSTRUCTIONS ON THE BACK

Month Day

Year

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_	WASTE MANIFEST	CADOGE	0/6/4/6/2	1517 41	cument No. ⊇1.21.∂1∂	1 0			ired by Federal I
	3. Generator's Name and Mailing Address F-16HT ACC ヨコミのに y					A. Stat	e Manifest		
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	4. Generator's Phone (حزي) 375	-	LLUY	11.5	<u>د</u>	1	e Generato		
	5. Transporter 1 Company Name	6				ri I	AIHIGI	<u> 316101</u>	44911
	1	•	UU C.	A ID Number	, -, , ,	C. Stat	e Transport	er's ID	<u> </u>
	7. Transporter 2 Company Name		US EF	A ID Number	31716		e Transport		3-427-6
		1		1 ( )		<u> </u>	sporter's Pi		
	9. Designated Facility Name and Site Addre	ess 10	D. US EF	'A ID Number	1 1 1	<del></del>	e Facility's	*****	
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				uer,	No.	Туре	Quant		nit Waste N /Vol
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-	J. Additional Descriptions for Materials Liste				j	K. Hand	ling Codes	or Wastes	Listed Above
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	15. Special Handling Instructions and Addition RUBBER SPECIAL L		Edicu <u>l</u> I						
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	18. Transporter 2 Acknowledgement of Recei		100			<b>3</b> 2 3	O JAPA		1 4 1/1
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EA 8700—22
(1ev. 9-86) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

INSTRUCTIONS ON THE BACK

Con

EPA 8700-22

(Rev. 9-86) Previous editions are obsolete.

DHS 8022A 10 5 Malla Soul Vellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS INSTRUCTIONS ON THE BACK (Rov. 9-86) Provided all pr

Month Day Year

Printed/Typed Name

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3. Generator's Name and		CODV CE				A. Sta	te Manifest	Document Ni	umber
11:210 54	EPIVAN	SORY SE	コムンム	الاجر		B Sta	te Generato	0404	<u> </u>
4. Generator's Phone (Z	43 875	-2930	Ç	1/257	7_	1 .			Didlate
5. Transporter 1 Compan	ny Name	6.	US EPA IC	) Number	<del></del>		te Transport		61014
	HEIVI	ic	ADQQA	3614	41312		insporter's P	ر بیسه	·776-E
7. Transporter 2 Compa <del>s</del>		<b>0</b> .	USEPAIL	number			nsporter's P		<del></del>
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11. US DOT Description (	(Including Proper Sh	nipping Name, Hazard Cla	ass, and ID Number)		No.	Туре	Quan	tity Uni Wt/V	
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UNIFORM HAZARDOUS 1. Generator's US	EPA ID No.	anifest	2. Pi	age 1 Informs	ition in th	ne shaded areas
WASTE MANIFEST CADO	C101416/1017 10	ment No.	, (	of 5 is not r	equired l	by Federal law.
As an Assess Address	R. II A F ISSE IN IT		A. Stat	e Manifest Docum	ent Num	ber
$\ell$				8807	622	2
Flight Accessory Services			B. Stat	e Generator's ID		
11310 Sherman Way, Sun Valley,	CA 91352		-	A H Q 3 6	اماما	2066
Generator's Phone (818) 765-6201 Transporter 1 Company Name	8. US EPA ID Number		C. Stat	e Transporter's II	70	200
				sporter's Phone	***	
Disposal Control	B US EPA ID Number	184	E. Stat	e Transporter's	-000	-024-3345
. Transporter 2 Company Name		1 1 1	F. Tran	sporter's Phone		
Designated Facility Name and Site Address	10. US EPA ID Number		G. Stat	e Facility's ID		
			ا ہر ا	AITOOLE	14161	1/1/17
Kettleman Hills Facility			H. Fac	ility's Phone	1.	
35251 Skyline Rd.	CA 7006461		(1)	51) 586	- 17	11
Kettleman Hill City, CA		12. Cont		13. Total	14.	1.
1. US DOT Description (Including Proper Shipping Name, Haza	erd Class, and ID Number)	No.	Туре	Quantity	Unit Wt/Vol	Waste No.
W-1	****	1.55	- 7	777		State
Hasardous Waste Selid R.Q.					1	EPA/Other
BOO-CEM-E-NA 9189		1.1/	- 1	MOOR	17	2006/D006
		11/	9 4	المراند المسلم	1	State
Hazardous Waste Solid R.Q.						181
NOS-CRM-N-NA 9189		21/1/	- 1	rett	У	EPA/Other
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		1. 1. K	DE	A A A Jo	4/	State
Hesardous Waste Solid R.Q.	Λ.	1				181
108-080-18-1A 9189		2		10011	W	EPA/Olh
Additional Descriptions for Materials Listed Above	11//	1. 1. 12	D IN	ndling Codes for	Wastes L	isted Above
C) See Profile J-15004						
D) See Profile J-15002  15. Special Handling Instructions and Additional Information	· //					
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15. Special Handling Instructions and Additional Information						
15. Special Handling Instructions and Additional Information  Cloves, Goggles		. fully and a		described shove	by prop	er shinning name
15. Special Handling Instructions and Additional Information  Gloves, Goggles  16.	he contents of this consignment are in all respects in proper condition for	fully and a	ccurately by highw	described above	by prop	er shipping name e international and
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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

## Instructions on the Back

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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4. Generator's Phone ( 818 765-6201			HAH	13 6 0 2 orters 10/0 7	2 0 6 6
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7. Transporter 2 Company Name	8. US EPA ID Number	er	E. State Transp		
9. Designated Facility Name and Site Address	10. US EPA ID Numbe		F. Transporter's G. State Facility		
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DHS 8022 A (1/88) EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-88) **Toxic Substances Control Division** Instructions on the Back Sacramento, California Please print or type. (Form designed for use on elite (12-pitch typewriter). 2. Page 1 Manifest 1. Generator's US EPA ID No. Information in the shaded areas UNIFORM HAZARDOUS Document No. / of / is not required by Federal law. WASTE MANIFEST A. State Manifest Document Number 88076221 3. Generator's Name and Mailing Address 4 11 V B. State Generator's ID H FHAIR 4. Generator's Phone ( '' ) 7 ' C. State Transporter's ID US EPA ID Number 5. Transporter 1 Company Name CALL 1-800-862-7550 D. Transporter's Phone 1 - K 11 K E. State Transporter's ID US EPA ID Number 7. Transporter 2 Company Name F. Transporter's Phone G. State Facility's ID US EPA ID Number 9. Designated Facility Name and Site Address 10. H. Facility's Phone 1 . . . C . Miles THE THEFT 13. Total 12. Containers Quantity Waste No. Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Туре 221 EPA/Other UKITE OIL T UFTIL 172 17 170 CENTER 1-800-424-8802; WITH State EPA/Other State C. EPA/Other State d. EPA/Other K. Handling Codes for Wastes Listed Above PESPONSE J. Additional Descriptions for Materials Listed Above WASTE CIL - WATER d. MATIONAL 15. Special Handling Instructions and Additional Information ALL TE SCOUL . 3 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and SPEL. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste б generation and select the best waste management method that is available to me and that I can afford. EMERGENCY Printed/Typed Name TRIE JOHN ON 17. Transporter 1 Acknowledgement of Receipt of Materials Signature Printed/Typed Name ŧ 11-11-00 5 18. Transporter 2 Acknowledgement of Receipt of Materials Month Day Signature Printed/Typed Name 19. Discrepancy Indication Space Å 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

DHS 8022 A (1/88)

Do Not Write Below This Line

Signature

YELLOW: GENERATOR RETAINS

Printed/Typed Name

Month Day

48. Transporter 2 Acknowledgement of Receipt of Materials Month Printed / Typed Name 19. Discrepancy Indication Space F Å

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Hen

Printed/Typed Name

Signature

Do Not Write Below This Lin

Month Day

DHS 8022 A (1/88)

EPA 8700-22 (Rev. 9-86) Previous editions are obsolete

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

UNIFORM HAZARDOUS WASTE MANIFEST  3. Generator's Name and Mailing Address.	
Flack Arcess y Services 11376 SARRIVAN ALAY STANDARD AS	A. State Manifest Document Number
4. Generator's Prione CP / 1 // 1 / 2 C /	M 12141613161012121016161
5. Transporter 1 Company Name 6. US EPA ID No. 7. Transporter 2 Company Name 8. US EPA ID No.	H   H   C   3   C   C   Z   D   C   G
7. Transporter 2 Company Name	D. Transporter's Phone (-) 437-750
d. USEFAID NO	umber E. State Transporter's ID  F. Transporter's Phone
Designated Facility Name and Site Address     10. US EPA ID No.	
9. Designated Facility Name and Site Address 10. US EPA ID No.	H. Facility's Phone
CPF FRE	1110571-213-595 6597
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers 13. Total 14. I.  Quantity Unit Waste No.  No. Type Wt/Vol
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WASTE MANIFEST	I. Generator's US EPA ID No. Do Lababababababababababababababababababab	Manifest ocument No.	2. Page of	is not	ation in the shaded areas required by Federal law.
3. Generator's Name and Mailing Address Flight Accessory Service				3755	ment Number 38 <b>7</b> 0
11310 Sherman Way, Sun V 4. Generator's Phone ( 889 765-6201	alley, CA 91352		B. State G	enerator's ID	0 2 2 0 6 6
5. Transporter 1 Company Name	6. US EPA ID Number		C. State Tr	ansporter's l	0 0/02"
7. Transporter 2 Company Name	1 C   A   T   D   18   O   D   B   6   8   US EPA ID Number	111814		rter's Phone ansporter's l	1_800_824_3345
	<u> </u>		F. Transpo	rter's Phone	
9. Designated Facility Name and Site Address	10. US EPA ID Number		G. State Fr	•	
Kettleman Hills Facility 35251 Skyline Bd.			l	Phone	1614161313171
Rettlemen Hill City, CA  11. US DOT Description (Including Proper Shipp)		12. Conta		3. Total Quantity	14. I. Unit Waste No.
a.	my Name, Hazaro Class, and ID Number/	No.	Туре	Quantity	Unit Waste No. Wt/Vot State
Hazardous Waste Solid Rq ORM-E-NA 9189	. Nos.	1.01.6	D <sub>I</sub> M <sub>I</sub>	. ( .=	181 \$PA/Other BOS
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Hazardous Waste Solid Rq	. Nos.			10	181 EPA/Other
ORM-E-NA- 9189		903	ן אף	1112	7 P008/0006
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		, ,			EPA/Other
15. Special Handling Instructions and Additional	Information				
Gloves, Goggles					
16.  GENERATOR'S CERTIFICATION: I hereb name and are classified, packed, marked international and national government regu	by declare that the contents of this consignment d, and labeled, and are in all respects in prope plations.	are fully and er condition f	l accurately or transport	described a by highway	bove by proper shipping according to applicable
determined to be economically practicable me which minimizes the present and future	that I have a program in place to reduce the view and that I have selected the practicable meiore threat to human health and the environment; on and select the best waste management method.	thod of treat OR, if I am	ment, storaç a smail quâi	ge, or dispo ntity generat	sal currently available to or, I have made a good
Printed/Typed Name	Signature	1271	<b>*</b>		Month Day Year
EKIK MINSON	- the time	1 Jun	٠. سد.		11111111111
<ol> <li>Transporter 1 Acknowledgement of Receipt or Printed/Typed Name</li> </ol>	<u> </u>	÷			March Day V
	Signature			_	Month Day Year
8. Transporter 2 Acknowledgement of Receipt o	of Materials		( .	<del></del>	1/12/08/20
rinted/Typed Name	Signature				Month Day Year
9. Discrapancy Indication Space  Specific Chemical Logs to  35251 2185	Manyeme + Inc. 11a. Kyline Rd.	. Not	accep	sto-l	
( , y,	copt of hazardous materials covered by this manife				HP 000022
Printed/Typed/Name / / //	Signature	or except as	noted in item	7	Month Day Year
John Kidwell	Hon	Killes	vel [		1/12/43/817

DHS 8022 A (1/87)

Yellow: TSDF SENDS THIS COPY TO GEMERATOR WITHIN 30 DAYS

DHS 8022 A (1/87) EPA 8700-22

(Rev. 9-86) Previous editions are obsolete.

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UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No	2. Pa	is no	ation in	Secramento, Cali the shaded area ired by Feder		
3. Generator's Name and Mailing Address		1111		ate Manifest Doo	ument f	Number		
	6 \$ X 3 3 4 4			865079	387			
4. Generator's Phone (				ate Generator's				
Transporter 1 Company Name						7		
KING + KINI WA'TE	6. US EPAID N	3320		ate Transporter's		4200		
7. Transporter 2 Company Name  8. US EPA ID Number  E. State Transporter's								
*	1111111	1111		ansporter's Phon				
9. Designated Facility Name and Site Addre	iss 10. US EPA ID N	umber	G. Sta	te Facility's ID	_			
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11/121 4111 1	CATCROCI	1668	H. Fa	cility's Phone	3-5	15-150		
		12. Con			1	15 459		
1. US DOT Description (Including Proper Shi	pping Name, Hazard Class, and ID Number)	No.		13. Total	Unit	I. Waste No.		
LILETE OIL AVI	S NH 1270	140.	Туре	Quantity	Wt/Vol	Waste No.		
ICHIL TOLLE		ļ.,			/	221		
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Additional Descriptions for Materials Listed	d Above	$\perp$				7		
WASTE OIL		28.	IL Hair	dling Codes for V	Yastes L	evodA beset		
				2.1	1			
WATER		A 21 A		701	W			
. Special Handling Instructions and Additions	al Information							
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proper shipping name and are classified on	clare that the contents of this consignment are funcked, marked, and labeled, and are in all respect	ully and accu	rately de	escribed above b	у			
according to applicable international and na	ational government regulations	ts in proper c	ondition	for transport by	highway			
under Section 3002(b) of RCRA, I also cer	who has been exempted by statute or regulation tify that I have a program in place to reduce loable and I have selected the method of tree	on from the o	duty to	make a waste m	inimizat	ion certification		
have determined to be economically practi minimizes the present and future threat to h	icable and I have selected the method of treat	tment, storag	e, or d	isposal currently	availab	le to me which		
Printed/Typed Name	Signature	//				onth Day Yes		
CEW HUGUST UF	Saw (	Lines	7	$\rightarrow$	ö	151515181		
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ENVITA T. KI	A/ Signeture	71. 8	11:	<i>/</i> , ,	М	onth Day Yes		
Transporter 2 Acknowledgement of Receipt	1111 40	the t	,/L	16	- 6	FFPRI		
Printed/Typed Name	Of Materials Signature			0				
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Discrepancy Indication Space	F. 1.1 - 1					шШ		
J-7 1	20 - 90							
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Spellity Owner or Co.								
acility Owner or Operator: Certification of	receipt of hazardous materials covered by this	s manifest ex	cept as	noted in Item 1	9.	-		
Facility Owner or Operator: Certification of Printed/Typed Name  TECMADRID	Signether	manifest ex		noted in Item 1		onth Day Year		

	se print or type. (Form designed for use on ell	te (12-pitch) typewriter.)				580	cramento, C	Automi			
Á	UNIFORM HAZARDOUS WASTE MANIFEST	A Consessor's LIC EDA ID No	Manifest ocument No.	2. Pag of	pe 1 Informatis not law.	tion in th require	ne shaded a	areas derai			
T	3. Generator's Name and Mailing Address	IS I		A. Sta	te Manifest Docu	ment Nu	mber				
Ш	FLIGHT AND FACTOR LEGISLE	61329	14	=040	î						
П	- 155 75° = 1 . X **	#202-10 party 2000				B. State Generator's ID					
Ш	4. Generator's Phone ( - '- )	-13 ^		CAD 981423320							
Ш	5. Transporter 1 Company Name	6. US EPAID NO			te Transporter's I			-			
Ш	King- T Kill- Deals Cin	8. US EPA ID No	= 1= 1= L		nsporter's Phone		759-55	æ			
Ш	7. Transporter 2 Company Name	8. US EPA ID NO	mber	E. State Transporter's ID F. Transporter's Phone							
		10. US EPA ID No	ımber		te Facility's ID						
	9. Designated Facility Name and Site Address	10. 03 EFA 15 11	2111001	CAT 0800 110 E9							
Ш	HALL 13 =			H Facility's Phone							
Ш	Eran where Ch	ENAITH BERKY	1 10 15 17	213-595-6597							
	11. US DOT Description (Including Proper Ship)		12. Cont	ainers	Total	Unit	i. Waste	No.			
П			No.	Туре	Quantity	Wt/Vol	*******	10.			
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П	J. Additional Descriptions for Materials Listed	Above		K. Har	ndling Codes for V	Vastes L	isted Above	•			
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11	WASTE CIL										
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П	15. Special Handling Instructions and Addition	al information									
П	NESER GLOVEL										
П											
11	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway										
	proper shipping name and are classified, pr	acked, marked, and labeled, and are in an responsitional government regulations.	acts in propor	00110111							
	according to applicable international and national government equations.										
$\  \ $	Unless I am a small quantity generator who has been exempted by statute or regulation from the day to waste generated to the degree I under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which										
П	minimizes the present and future threat to human health and the environment.										
Ш	Printed/Typed Name	Signature	20. 2. 2				C   /	1.17			
7	LEWIL AUKINTINE	.,.	-		***************************************			1.1.			
1	17. Transporter 1 Acknowledgement of Receip	pt of Materials Signature					Month Da	y. Year			
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r	19. Discrepancy Indication Space										
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1	as Falling Owen or Country Cartification	of receipt of hazardous materials covered by	this manifest	excep	as noted in Iter	n 19.					
1	20. Facility Owner or Operator: Certification Printed/Typed Name	Signature					Month Da	y Year			
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mornia—Health and Welfare Agency							
print or type. (Form designed for use on elite (12-pitch) typewriter.)  UNIFORM HAZARDOUS  1. Generator's US EPA ID No.	Manifest Dorument N	<b>a</b> . 2	. Page	1	Informa is not	tion in the require	ne shaded areas d by Federal
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Consistor's Name and Mailing Address			8	61	260	98	
FLIGHT ACCESSORY SERVICES 11310 Sherman Hay 213 875-2930		B	State	e Gene	rator's II	EXEM	54826
ena Valley. CA		-14			sporter's		19655
	36 4 2				r's Phone		201-9508
CHEM-RAN PUMPING SERVICES, INSEPAID		1 1			sporter's		
. Transporter 2 Company Name	111				r's Phon	0	
Designated Facility Name and Site Address 10. US EPA ID	Number		3. Stat	e Faci	lity's ID		
CASMALIA RESOURCES		ļ.	4 Fac	ility's	Phone		
NTU ROAD C AD D .20 .7.	48 1 2	5	80	93	7-84	49	
CASHALIN	12.0	Contai	ners		13. Total	14. Unit	L
1. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	No	o.	Type		uantity	WtVol	Waste No.
UN #28	11 00	18	M	010	600	P	181
WASKE POISONOUS SOLID, N.O.S., POISON B	"	.		1	1 1 1		
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d.	1			1			1
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J. Additional Descriptions for Materials Listed Above							į
Absorbant 78%					F009		
Cyanide							
78% 15. Special Handling Instructions and Additional Information							
78% 15. Special Handling Instructions and Additional Information GLOVES		-1 200	uratal	03/	FOO9	ye hy	
78%  15. Special Handling Instructions and Additional Information  GLOVES  16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment proper shipping name and are classified, packed, marked, and labeled, and are in all proper graphicable international and national government regulations.  Unless I am a small quantity generator who has been exempted by statute or required. Section 3002(b) of RCRA, I also certify that I have a program in place to reconstruction.	equiation fro	m the	duty	9 descrition for	ribed abor transpo	ive by rt by high ste minim	way
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A	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Docui	mifest ment No.	2. Page 1 of	is not law.	on in the shaded areas required by Federal
	3. Generator's Name and Mailing Address	and I			86	13297	
	4. Generator's Phone ( )					nerator's ID	20
	5. Transporter 1 Company Name	6.	US EPA ID Numbe	er	C. State Tra	nsporter's ID	5 4210
		الليا الله	US EPA ID Numbe	ئاءل			13 4dy -8500
	7. Transporter 2 Company Name		I I I I I I	"	F. Transpor	nsporter's ID	
	9. Designated Facility Name and Site Address	10.	US EPA ID Numbe	er .	G. State Fac		
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1	11. US DOT Description (Including Proper Ship)		D Number)	No.		Total	Unit I. Vt/Vol Waste No.
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	J. Additional Descriptions for Materials Listed	Above			K. Handling	Codes for Wa	stes Listed Above
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	15. Special Handling Instructions and Additions	al information					(2.000)
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	GENERATOR'S CERTIFICATION: I hereby dec proper shipping name and are classified, pa according to applicable international and na	cked, marked, and labeled, and	onsignment are fully are in all respects in	and accu n proper o	rately describe	bed above by transport by h	iighway
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4	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. C M   D   O   O   G   G   G   G   G   C   D   O   C   C   C   C   C   C   C   C   C	Manifest cument No.	2. Pa			the shaded areas red by Federal
	3. Generator's Name and Mailing Address FLIGHT ACCESSORY SCRUIC 11310 SHERMAN WAY	্ৰ		1	te Manifest Docu 361329 Ite Generator's ID	75	umber !
Ш	SUN VALLEY CA \$ 1357 4. Generator's Phone ( 213 ) 875-2			CA	D 000 646	257	
11	5. Transporter 1 Company Name	6. US EPA ID NUN			nsporter's Phone	C 2/3	1.6233
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11	11. US DOT Description (Including Proper Ship)	ping Name, Hazard Class, and ID Number)	No.	Туре	Total Quantity	Unit Wt/Vol	Waste No.
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11	J. Additional Descriptions for Materials Listed	1 Above		K. Har	dling Codes for V	Vastes	Listed Above
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	15. Special Handling Instructions and Addition	al information			1	amare e	
$\parallel$	S LOVES & GOEGLES						
	16. GENERATOR'S CERTIFICATION: I hereby dec proper shipping name and are classified, pa according to applicable international and na	clare that the contents of this consignment are fu acked, marked, and labeled, and are in all respect ational government regulations.	ally and accu is in proper	rately condition	described above to on for transport b	y y highw	ay
	Unless I am a small quantity generator w	who has been exempted by statute or regulation rtify that I have a program in place to reduce to ticable and I have selected the method of treat	the volume	and to:	cicity of waste o	enerate	d to the degree I
Ш	Printed/Typed Name	Signature			100		Month Day Year
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Γ.	19. Discrepancy Indication Space						
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1	20. Facility Owner or Operator: Certification of	of receipt of hazardous materials covered by thi	s manifest	except	as noted in Item	19.	
1	Printed/Typed Name	Signature			•		Month Day Year
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15. Special Handling Instructions and Additional information

RUBBER GLOVES - SAFETY GLASSES

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Month Day Year Signature Printed/Typed Name unitario Sours LEW (S AUGUSTINE 17. Transporter 1 Acknowledgement of Receipt of Materials Month Day Year

Signature Printed/Typed Name

18. Transporter 2 Acknowledgement of Receipt of Materials Month Day Year Signature

Printed/Typed Name

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Month Day Year

Signature Printed/Typed Name

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	ansporter 2 Company Name	icea Inc.	CIAD	US EPA ID Numi	161412	15	E. Stat	nsporter's re Transp	orter's ID	213-2	91-9500
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ornia—Health and Welfare Agency  aved OMB No. 2050—0039 (Expires 9-30-88)  print or type. (Form designed for use on elite (12-pitch typewriter).					Department of Health Se Toxic Substances Control Di Sacramento, Cal
UNIFORM HAZARDOUS  Separator's US EPA II  C A D O D	D No.   Dq   Dq	Manifest scument No.	2. Page of	intorm	ation in the shaded area required by Federal law.
3. Generator's Name and Mailing Address Flight Accessory Services 11310 Sherman Way Pure of the Cap. 213-875-293	0		B. State G	lanifest Documents Billionerator's ID	85543
5. Transporter 1 Company Name Chem-Ran Pumping Services In GA 7. Transporter 2 Company Name 8.	US EPA ID Number D 980 736 42 US EPA ID Number	25	C. State T D. Transpo	ransporter's l orter's Phose ransporter's l	3-291-9508
<b>z</b>	US EPA ID Number	111	F. Transpo	orter's Phone	
Casmalia Respurces Inc Casmalia, Ca			H. Facility	0 2 0	
	p ρ20748125	12. Conta	<u> </u>	937-84	14. I.
11. US DOT Description (Including Proper Shipping Name, Hazard Class a.	s, and ID Number)	No.	Туре	Quantity	Unit Waste No. Wt/Vot State
HAZARDOUS WASTE SOLID, N.O.S., (	ORM-E, NA918	OD 16		1000	P 181 EPA Other DOOO State
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Nickel Chloride 25 X Absorbant 75 X			°. 03		d.
15. Special Handling Instructions and Additional Information					
Wear appropriate safety attire					
16. GENERATOR'S CERTIFICATION: I hereby declare that the conname and are classified, packed, marked, and labeled, and are international and national government regulations.	itents of this consignment e in all respects in prope	are fully and er condition	d accurately for transpor	described at by highway	bove by proper shipping according to applicable
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17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name JOE Davidson	Signature // Signature	10	aui	San	Month Day Yea
18. Transporter 2 Acknowledgement of Receipt of Materials	1 100		, was	3000	101101918
Printed/Typed Name	Signature				Month Day Yea
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous mater	ials covered by this manife	est except as	noted in Item	n 19.	
Printed/Typed Name	Signature				Month Day Year

EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

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۸ĺ	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EP	A ID No.	Manifest Document No.	2. Page 1 of	is not	tion in t	he shaded areas ed by Federal
ΓI	3. Generator's Name and Mailing Address	KI+PY ICT I	<u>                                    </u>			law. fanifest Docu	ment Nu	ımber
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	4. Generator's Phone ( )  5. Transporter 1 Company Name	6.	IJQ EDA II	D Number		Cook 4		
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H	7. Transporter 2 Company Name	8.	1	D Number		ransporter's		
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	2120 m deal 24	1 1	¥1 #1:1 . 1414	1/1/1/1517			159	7
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	according to applicable international and na	itional government regulation has been exempted	ilations. Id by statute or rec	nulation from the	duty to ma	ake a waste	minimiza	tion certification
	the continue concepts of DCDA I also car	tifu that I have a nroc	trem in blace to re-	duce the volume	and toxicit	V OT WASTE C	enerated	1 to the negree i
	have determined to be economically pract minimizes the present and future threat to h	icable and I have sele luman health and the e	nvironment.	i treatment, stora	ige, or dist	Joan Culterill		
	Printed/Typed Name		Signature	7 / 11 / 11 / 11 / 11		-		Month Day Year
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	18. Transporter 2 Acknowledgement of Receip		<del></del>	1			<u> </u>	
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(Form designed for use on LINFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest Document N	O.	Page 1			he shaded are ed by Fede
WASTE MANIFEST	CIAIDICICICIEI416121517			of State M	law.		·
Generator's Name and Mailing Address			^:		1329		
Generator's Name and Manning Address	e <b>r</b> ose		B. 5		enerator's ID		
Generator's Phone ( ) - / ) - / 3	, Ext		-		006 46		
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Transporter I Company Name	K 141517181714	ا دا ۱۰ ا دا دا	<u> </u>				439-950
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according to applicable international an	or who has been exempted by statute or re	guiation from	the dut	y to m	ake a waste	minimiz	ation certifica
under Section 3002(b) of HCHA, I also	racticable and I have selected the method	educe the volu of treatment, t	itte and storage,	or dis	posal curren	tly availa	able to me w
minimizes the present and future threat	to numan nearth and the environment.						Month Day
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7. Transporter 1 Acknowledgement of Re	Signature						Month Day
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8. Transporter 2 Acknowledgement of Re	ceipt of Materials						
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	on of receipt of hazardous materials covered	by this mani	fest ex	cept as	noted in Ite	m 19.	
0. Facility Owner or Operator: Certificati	Signature						Month Day
Printed/Typed Name							

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3. Generator's Name and Mailing Address	DZY SELVILES			ate Manifest Doo		Number
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Form,	of California—Health and Welfare Agency Approved OMB No. 2050—0030 (Expires 9-30-88) Print or type. (Form designed for use on elite (12-pitch typewriter).				т		tment of Health Service stances Control Division Secremento, Califor
4	. UNIFORM HAZARDOUS  WASTE MANIFEST  1. Generator's US EPA II	A6757 000	Manifest cument No.	1	ve I .		the shaded areas by Federal law.
	3. Generator's Name and Mailing Address FLIGHT ACCESSORY SEK 11310 SHEKMAN WHY SUN	VICES CA	•		te Manifest Docum	ient Num	3
	4. Generator's Phone (213) \$47-2930	9/25	,2		te Generator's ID 4 D 000	646	0257
	5 Transporter 1 Company Name  KING KING JAHIL CIL FA	D 981423	320	C. Sta D. Tra	te Transporter's II	_	449-850
	7. Transporter 2 Company Name 8.	US EPA ID Number		<u> </u>	te Transporter's IC	)	
		US EPA ID Number		<b></b>	isporter's Phone		
	9 Designated Facility Name and Site Address P.R.I. F. S. F. 29 ST	US EPA ID NUMBER			te Facility's ID		
	SIGHAL HILL CA	T080911	059	H. Fac	ility's Phone		
	11. US DOT Description (Including Proper Shipping Name, Hazard Class	s, and ID Number)	12. Conta	Type	13. Total Quantity	14. Unit Wt/Vol	i. Waste No.
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DHS 8022 A (1/87)

EPA 8700—22 (Rev. 9-86) Previous editions are obsolete. YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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DHS 8022 A (1/87)
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YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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DHS 8022 A (1/87) EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

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Yellow: GENERATOR RETAINS

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	16. GENERATOR'S CERTIFICATION: In	ereby declare tha	t the contents of this cons	ignment are ful	ly and a	ccurately descri	bed		
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18. Transporter & Acknowledgement or Receipt of Materials Year Month Day Signature Printed/Typed Name 19. Discrepancy Indication Space Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Year Month Day Signature Printed/Typed Name DHS 8022 A (7/84) HP 000048 Yellow: GENERATOR RETAINS (EPA 8700-22)

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UNIFORM HAZARDOUS

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II	3. Generator's Name and Mailing Address	SERVICES				A St	B613		
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1	Printed/Typed Name	. —	Signature	-	-		Min		Month Day Year
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POR	18. Transporter 2 Acknowledgement of Receipt	of Materials						node	· · · · · · · · · · · · · · · · · · ·
TER	Printed/Typed Name		Signature						Month Day Year
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L	20. Facility Owner or Operator: Certification of	consist of beauty	oue materiale assess	by this ma	nifeet d	excent	as noted in	Item 10	
Y	20. Facility Owner or Operator: Certification of Printed/Typed Name /	receipt of nazaro	Signature Signature	/- /		7	as noted in	10111 10.	Month Day Year
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DHS 8022 A (11/85) (EPA 8700—22) YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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Ш	1.	4. Generator's	ALLEY Phone (213	875-	2930				1000	D OOO 6		57
Ш		5. Transporter	1 Company Nan	ne		6.	US EPA ID N		C. St	tate Transporter	s ID	9/103
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Ple	ase print or type. (Form designed for use on e	lite (12-pitch) typewriter.)				TOAIC	/ Sacr	amento, Ca	
4	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA I	l Dox	Manifest cument No.	2. Page of	is not law.	tion in the	shaded ar	reas erai
	3. Generator's Name and Mailing Address  FRIPAT ACCESSORY  1. 510 SAFERMAN W	services			8	Menifest Dog 61328 Generators II	91	ber 3	
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П			للبليلل	$\perp \perp \perp$	-	sporter's Phone	S. Same		1
	9. Designated Facility Name and Site Address Chemical Wasten	MIT	US EPA ID Num	ber	G, STAN	Facility's ID	~h	11.11	4
Ш	Kettlemen Hills F 2525/ SKY LINE Rd	acility			H Faci	Hy Linobe	747	7/1/	
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	15. Special Handling Instructions and Additions GIOVES	ai Information	1. 15 k. 142		8.7	( 1970 ( )	73	* *	
	16. GENERATOR'S CERTIFICATION: I hereby dec proper shipping name and are classified, pa according to applicable international and na Unless I am a small quantity generator we under Section 3002(b) of RCRA, I ariso cer have determined to be economically pract minimizes the present and future threat to he	cked, marked, and labeled diomal government regulation of the control of the control of the control of the control of the difference of the control of the c	and are in all respects ons. y statute or regulation in place to reduce the d the method of treatr	from the	condition duty to rand toxic	for transport by make a waste m ity of waste ge	highway ninimizatio enerated to	the degre	e I
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Ţ	17. Transporter 1 Acknowledgement of Receipt		Eden	D.Co	ule	<del>y</del>	1/1	بايتاسك	919
R	Printed/Typed Name		Signature				Mor	nth Day	Year
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OR	18. Transporter 2 Acknowledgement of Receipt								
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ţ	20. Facility Owner or Operator: Certification of			manifest e	except as	noted in Item			
	Printed/Typed Name	(1)	Signature		1	23	Mon	oth Day	Year
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UNIFORM HAZARDOUS WASTE MANIFEST  3. Generator's Name and Mailing Address FLIGHT ACCESSORY LIGHT ACCESSORY 4. Generator's Phone ( 2/3 ) 875- 5. Transporter 1 Company Name LIGUID WASTE MET 7. Transporter 2 Company Name  9. Designated Facility Name and Site Address CHEMI, IVASTE MET STORY ALLES	500 1-46 1 4 7 -29 = 0 6. US  C A T C C  8.	7352 EPA ID Numb	ber	A. State B. State		ument N		
3. Generator's Name and Mailing Address  FLIGHT ACCESSORY  LIGHT ACCESSORY  4. Generator's Phone ( 2/3 ) 875-  5. Transporter 1 Company Name  LIGUID WASTE MET  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  CHEMI, IVASTE MET  KETTEMIN ALLE FACILITY  35251 SEVANCE (CD.	E E VICES  SUN 1-4.E ( ) 4  - 29 = 0    C A T C C   8. US	/35元 EPA ID Numb	ber	A. State B. State	Manifest Doc 61329 Generator's II	71		
4. Generator's Phone (2/2) 875- 5. Transporter 1 Company Name  LIQUID WASTE MET  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  CHEM, 1045TE MET  ACTUALY  35251 SEVANCE (2)	500 1-46 1 4 7 -29 = 0 6. US  C A T C C  8.	EPA ID Numb	Part of the second	B. State	Generator's II	D	57	
4. Generator's Phone ( 2/2 ) 875- 5. Transporter 1 Company Name  LIGUID LIASTE MET  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  CHEM, 1045TE MET  RETTERMENT ALLESTER  35251 SEVANCE (C)	6. US   SATE   US   SATE   US 	EPA ID Numb	Part of the second	CA	10006		57	
5. Transporter 1 Company Name  LIGUID LIASTE MET  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  CHEM, 104 STE MET  KETTEMAN ALLESTANDE  35251 SEVANDE (CD.	6. US ICIAITICKEL 8. US		Part of the second			462	57	
P. Designated Facility Name and Site Address  CHEM. 1045TE MIGT  KETTERIST ALLE STORY  35251 SEVENE (C).	ISIAITICEL 8.		Part of the second	C. State	Transporter			
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CHEM, WASTE MIGH KETTEMAN ALLE EASTEN ESSET SEVENE NO.	10 110	111	111		sporter's Phone		7	
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					ity's Phone	-	4.	Ten:
	I: IAIT ISIC	C 6 46	12. Conf		13.	1 14	17 to 17 to 18	· ·
11. US DOT Description (Including Proper Ship		mber)	No.	Туре	Total Quantity	Unit Wt/Vol	Waste No.	<b>49</b> ;
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1.							100	43.4
15. Special Handling Instructions and Addition	Ax - 5 537 46  al information	7.5.33						
16. GENERATOR'S CERTIFICATION: I hereby deproper shipping name and are classified, proceeding to applicable international and numbers I am a small quantity generator under Section 3002(b) of RCRA, I also centre determined to be economically pracminimizes the present and future threat to	acked, marked, and labeled, and are in ational government regulations. who has been exempted by statute ertify that I have a program in place tticable and I have selected the met human health and the environment.	or regulation	n from the	duty to n	make a waste	minimiz generate	tation certification to the degree able to me whi	9 1
Printed/Typed Name	Signature	ر سے ان	1.	1	•	19	Monin Day Mai⊋i⊃izis	
17,77anaporter 1 Acknowledgement of Receip			Carre				الإلكا كالها	حلل
Prigted/Typed Name	Signature		1	/-			Month Day	Year
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18 Transporter 2 Acknowledgement of Receip								v
Printed/Typed Name	Signature					96	Month Day	Year
40 Discrepancy Indication Course		1		11			سبب	
19. Discrepancy Indication Space	CITY C. 45239	d 1111°	9	** z *	3	,	1 /	
20. Facility Owner or Operator: Certification	of receipt of hazardous materials co		manifest	except as	s noted in Iter	n 19.	Month Day	Year

DHS 8022 A (11/85) (EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

(Form designed for use on elite (12-pitch	i chbassistari						
	nerator's US EPA ID N		<b>Aanifest</b>	2. Pa	ge 1 Infor	mation in	the shaded areas
WASTE MANIFEST	15566144	JDoc	ument No.	of		ot requi	red by Federal
3. Generator's Name and Mailing Address						Daguera	
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Generator's Phone ( )     Transponer 1 Company Name	2 7 27			1	HOAD	044	6257
5. Iransporter 1 Company Name	6. (	JS EPA ID Num	ber	C.Su	te Transport	or's ID	0431
1 1 1 1				D Tee	ngnomor'o 0		56147
7. Transporter 2 Company Name	9	IC COA ID No.	-//	10.110	msporters P	none	182-0347
•				1			
9. Designated Facility Name and Site Address				F. Tra	nsporter's P	hone	
5. Designated Facility Name and Site Address	10. ξ	JS EPA ID Numi	ber	G.Ste	te Facility's	ID	
- to the a market with the				1	·		
NTHROOM				LI East	ility's Phone		
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		1.4.÷	1 2 2	650	05193	ا متني 🖚 🏲	449
11. US DOT Description (Including Proper Shipping I	Name, Hazard Class	and ID Number	12.Conta	iners	Į IJ.	14.	1 .
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by Additional Descriptions for Massiste Cond to				20			
L. Additional Descriptions for Meterials Listed At	bove			K.Han	dling Codes fo	or Wastes	Listed Above
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5. Special Handling Instructions and Additional In				K.Hen	dling Codes fi	or Wastes	Listed Above
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15. Special Handling Instructions and Add	ditional Information					#1 24.5	•
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20. Facility Owner or Operator: Certification Item 19.	of receipt of hazardous materials cove	red by this ma	nifest excep	t as noted	l in		
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UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest No.	2. Page of	is not law.	require	ne shaded areas ad by Federal
4. Generator's Phone ( - / 5 ) 5. Transposer 1 Company Name	1600 Way 2120-11.y		B State	55054 Generator	10	
J. Service Company Name	•. ••		C.State	Transporter	103	4992
7. Transporter 2 Company Name		PA ID Number	E State	Transporter	70 JA	1983-08
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3. Generator's Name and Mailing Addr	88 Cr VICC 5		550537	ument Number
4. Generator's Phone (213) 27 5. Transporter 1 Company Name	Y 5-2130	CA	Generator's I	46257
5. Transporter 1 Company Name  7. Transporter 2 Company Name	6US EPA ID Num	D.Trans	Transporter's	10 561412
7. Transporter 2 Company Name	8. US EPA ID Num	E. State F. Trans	Transporter's porter's Phone	ID
9. Designated Facility Name and Site A	CE 1	5.	Facility's ID	
074 0145 C 114 6-1.7	CA602674	H.Facilie	y's Phone	44 9
11. US DOT Description (Including Proper S	hipping Name, Hazerd Class, and ID Numbe	12.Containers	13. Total	14. Unit W/Vol Waste No.
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15. Special Handling Instructions and Ad G/0 VC 5	litional Information			
	by declare that the contents of this consignm issified, packed, marked, and labeled, and are ble international and national governmental	e in all respects in pr	urately describe oper condition f	or
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18. Transporter 2 Acknowledgement or R Printed/Typed Name	Signature			Month Day Yea
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification Item 19.	of receipt of hazardous materials covered	by this manifest ex	cept as noted	in Date
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passe print or type. (Form designed for use on elite (12-pitch) typewriter.)  UNIFORM HAZARDOUS 1. Generator's US EPA ID No.	Manifest	2. Page	1 Unform	etion in t	ne shaded areas
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3. Generator's Name and Mailing Address		A.State	Manifest	ocumen	t Number
FLIGHT ACCESSORY SERVICES		84;	5054	10	
11310 Sherman Way , Sun Valley CA 91352			Generator's		
4. Generator's Phone (213 ) \$75-2930 5. Transponer 1 Company Name 6. US EPAID Num			000646		74 W J
		C.State	I ransporter	78 10	57.076
7. Transporter 2 Company Name 8. US EPA ID Num			Transporter		13///0-02
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9. Designated Facility Name and Site Address 10. US EPA ID Num	ber	Committee of the commit	Facility's II		
Rho Chem Corp.			0083644		,
425 Isis Ave			y's Phone		-
Inglewood, CA 90301 C.AD.0.08.3.6.4	4.32	(213	776-(	1233	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number	12.Conta	Type	13. Total Quantity	14. Unit Wt∕Vol	I. Waste No.
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			5 5 5 6		
15. Special Handling Instructions and Additional Information  Gloves and Goggles to be worn when handling i	la sard	ous t	laste		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignm above by proper shipping name and are classified, packed, marked, and labeled, and are transport by highway according to applicable international and national governmental	in all respe	icts in pro			Date
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18. Transporter 2 Acknowledgement or Receipt of Materials		,			Date fonth Day Year
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19. Discrepancy Indication Space  20. Facility Owner or Operator: Certification of receipt of hazardous materials covered Item 19.	by this mai	nifest exc	cept as note	d in	Date

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				te Generator's	-	# F _1894-
4. Generator's Phone (2/7) § 5. Transporter 1 Company Name	6. US EPA ID	Number	CSU	DOOO 6	462	57
				nsporter's Pho		4999
7. Aransporter 2 Company Name	8. US EPA ID	Number		te Transporter		482 ON
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9. Designated Facility Name and Site		Number	G.Sta	te Facility's ID		
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II NTUKTAd .	• 0000 to 1000 1 (eq. 10) (eq.			ility's Phone		•
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11. US DOT Description (Including Proper)	Shipping Name, Hazard Class, and ID Nu	mber 12.Cont	L	13. Total	Unit	
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17. Transporter   Acknowledgement of Re			_			Date
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18. Transporter 2 Acknowledgement or Ro		· <i>y</i>				Date
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20. Facility Owner or Operator: Certification		red by this mar	nifest e	xcept as noted	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	Date
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	3 Generator's Name and Mailing Address	222			A Stat	PANAS B	ocumen	Number
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	4. Generator's Phone (2/3) 8	75-2930	LIC COA ID N b			te Transporter		
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	7. Transporter 2 Company Name	8	US EPA ID Numb	er er		e Transporter		3-0342
		1			F. Trai	nsporter's Pho	ne	
	9. Designated Facility Name and Site A		US EPA ID Numb	er	G.Ste	te Facility's IC	)	
	CASMANA LESC	urce 1				War Jan Maria		
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	CASMALIA CALIF	· 27	10-6748	12.Cont	niners	173/	14.	1
	11. US DOT Description (Including Proper S			No.	Туре	Total Quantity	Unit Wt/Vol	Waste No.
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П	3. Gangrator's Name and Mailing Address / servic	<u> </u>		A State	Manifest D	ocumen	nt Number	7.14
	/ / * " -	- 3		845	5054	5	4	
	4. Generator's Phone (213) 875-2930			C 4	0000	46	257	,
	5. Transporter 1 Company Name 8. A. Quid Waste Met CA	T JUS EPA ID NYM)	\$ 4	1	Transporter		9 3 03	U L
	7. Transporter 2 Company Name 8.	US EPA ID Numb			Transporter	-	73-03	
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	9. Designated Facility Name and Site Address (10.	US EPA ID Numb	er	G.State	Facility's II	5	. 1-	
	CASMOLIO CAL.	D020743	125	H.Facility	Phone	944	19	
	11. US DOT Description (Including Proper Shipping Name, Hazard (	Class, and ID Number,			13. Total	14. Unit	L. Waste !	
G E	a. HAZ JEDOUS WASLE HIPSI	t NOS	No.	Туре	Quantity	W Vol	VVaste j	<b>40.</b>
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	15. Special Handling Instructions and Additional Information $G/\rho  \nu  e  S$					·		•
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	3. Generator's Name and Mailing Address	665			55052	Y ment	Number
	4. Generator's Phone (213) 875 - 1930  5. Transporter 1 Company Name  6.	CANT		CA	Generator's	46	
	5. Transporter 1 Company Name  6.  4.4 4 4.4 W45 E M G E  7. Transporter 2 Company Name  8.	US EPA ID Numbe アミックラサノベ US EPA ID Numbe	9.4.	D.Trane	Transporter's Phor	10/14	1983-034
	9. Designated Facility Name and Site Address 10.	US EPA ID Numbe		F. Trans	sporter's Phor Facility's ID	ne	
	NTU ROAD	70.020748.	125-	H.Facili	ty's Phone	· • •	
	11. US DOT Description (Including Proper Shipping Name, Hazard	d Class, and ID Number,	12.Conta		13. Total Quantity	14. Unit	Waste No.
G E N E	WATER Soluble oil N	A 9189			600	201	222
ATO	b.	** 110 1					
*	<b>c</b> .						
	d.						
	NUMBER OF STREET	20 A 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	- 20	K.Hank	fling Codes for	Waster	Listed Above
	15. Special Handling Instructions and Additional Information		7		······································		
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	16. GENERATOR'S CERTIFICATION: I hereby declare that the co above by proper shipping name and are classified, packed, mark transport by highway according to applicable international and	red, and labeled, and <b>are</b> i	n eli resp	ects in p	curately descr roper condition	ibed n for	
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-	17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature	£	<i>j</i> .			Date  Month Day Year  91/3/3
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L - T Y	20. Facility Owner or Operator: Certification of receipt of hazard tem 19.	ous materials covered b	y this m	anifest e	except as note		Date
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į	UNIFORM HAZARDOUS WASTE MANIFEST	Geoperator's US ERAPO Not 2 57	Manifest Document No.	2. Pag of			he shaded at ed by Fed	
	3. Generator's Name and Mailing Address	services IsunValley Cu 71	مة "دوا	84	55053	Cumer	t Number	
	4. Generator's Phone ( 13) \$ 75	•		B. Stat	Generator's	46	257	
	5. Transponer 1 Company Name	6. A DEC 33	Number E 4 4 3 2		e Transporter			62
	7. Transporter 2 Company Name	8. US EPA ID	Number	E. Stat	e Transporter	s ID		
	A Decigrated Leading Vision				esporter's Pho		- 4	
	9. Designated Facility Name and Site Addre	ess 10. US EPA ID I	Number		Facility's ID		4432	7
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	Additional Congriptions by Materials List	tAgra Bot		K.Han	dling Codes for	Waster	Listed Abov	~
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	15. Special Handling Instructions and Addition	as, water soy		31.				
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	above by proper shipping name and are classif transport by highway according to applicable i	1eg, packed, marked, and labeled, and international and national governme	are in all respi ntal regulation	ects in p s.	roper condition	i tor	Date	
V	Printed/Typed Name Edwin P. Conley	Similare	n P.Co	u	lare	Á	Hogin Day	Yeer.
ij	17. Transporter 1 Acknowledgement of Receip	1 1		_	$\overline{}$		Date	
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SPORTER FACILITY	18. Transporter 2 Acknowledgement or Receip Printed/Typed Name  19. Discrepancy Indication Space  20. Facility Owner or Operator: Certification of receip	Signature	red by this ma	nifest e		A A	Date	د اثر

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	Transporter 2 Company Name	L	1 A. T. W. C. E.	7.21. 1. 1. 1. H.				
7.	Transporter 2 Company Name				E. Stat	e Transporter	's ID	
-	Designated Facility Name and Site	Address 10	US EPA	ID Number		nsporter's Pho e Facility's ID		
1	A CALLAC PARTY Name and Site A		. 03 EFA	(ID Nomber	9.512	e recarry v		
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1 /	The street of	Ľ	1. J. D. E & 6 )	14025.	1000	937-8	44	9
11	. US DOT Description (Including Proper 3	Shipping Name, Haz	ard Class, and ID	Number,	Type	Total	14. Unit Wt/Vol	l.
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of California-Health and Welfare Agency ARDOUS WASTE MANAGEMENT BRANCH 744 P Street Picramento, CA 95814

# UNIFORM HAZARDOUS WASTE MANIFEST 1089

Department of Health Savices

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Department of Health Services

State of California—Health and Welfare Agency
HAZARPOUS WASTE MANAGEMENT BRANCH
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#### UNIFORM HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE MANAGEMENT BRANCH 714-744 P Street \* √ crame

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UNIFORM HAZARDOUS WASTE MANIFEST

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#### UNIFORM HAZARDOUS WASTE MANIFEST

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HAZARDOUS WASTE MANAGEMENT BRANCH 714 744 P. Street -Sacramento. CA 95814

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HAZARDOUS WASTE MANAGEMENT BRANCH 714-744 P Street Sacramento, CA 95814

Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER

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#### **UNIFORM HAZARDOUS WASTE MANIFEST**

ÁZARDOUS WASTE MANAGEMENT BRANCH 714-744 P Stillet Sal ramenton Cit 95814

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11210 SHERMAN WAY					<del>                                     </del>	
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This is to certify that the above-named wastes are properly classified, describ	ped, packaged, marked	and labeled, and a	ire in			
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Facility owner or operator: Certification of receipt of hazardous waste covered	by this manifest except	as noted in the	ים	ATE RECEIVED &	ACCEPTE	
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Ftate	or <u>California</u> —Health and Welfare Agency	$\times$	DEC	5 1984		Depai	tment o	of Health Services
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e Diaa	se print or type. (Form designed for use on elit	e /12-nitch) typewriter	Aau i	*****				A PARTY OF THE PAR
À	UNIFORM HAZARDOUS WASTE MANIFEST	Generator's I		Manifest	2. Page 1 of	Information is not re law.	n in the s quired	shaded areas by Federal
	3. Generator's Name and Mailing Add	SETV.	ic e		1 4 5	50548	ment	effiber "
	11310 Sherman	way su	N VAlley Co.	1, <del>1</del> 91352	B.State	Generator's II	162	57
	4. Generator's Phone (=13) P.  5. Transporter 1 Company Name - RHO han Incle	$\frac{3}{2} = \frac{5}{2} = \frac{6}{2}$	US EPA ID No	umber /4 ₹ 2.	C.State	Transporter's orter's Phone	0 5	202.625
	7. Transporter 2 Company Name	word (3/17).	US EPA ID No	ımber	E. State	ransporter's		
	9. Designated Facility Name and Site	Address 10	D. US EPA ID No	umber	G.State	orter's Phone Facility's ID		
	RUB-Chem Cor	<i>حر</i> .			CA	1002	364	432
	TNOIEWOOD CA	/i <del>/-</del>	C 19000936	4432	H.Facility	3) 77		6233
	11. US DOT Description (Including Proper	Shipping Name, Ha	zard Class, and ID Num	ber) No.	Type	Total	14. Jnit ⁄t∕Vol	l. Waste No.
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	J. Additional Descriptions for Material	Listed Above			K.Handli	ng Codes for V	Vastes L	Isted Above
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	con Or from			1		A Silver		· · · · · · · · · · · · · · · · · · ·
	15. Special Handling Instructions and A	Additional Information	on —					
	18. GENERATOR'S CERTIFICATION: If above by proper shipping name and are transport by highway according to app	classified, packed, n	narked, and labeled, and	SLO ILI BILLOS	bects in bro	urately describ per condition f	ed or	Date
	Printed/Typed Name	•	Sign ( Sign 6)	n P.	Con	ley	Ma 1/	onth Day Year
H	Edwin P. Conley  17. Transporter 1 Acknowledgement of	Receipt of Materia	Ns 2	-	Con	<u> </u>		Date
TRANS	Aristed/Typed Name Thomas	5 (901)	Signature	U. N	homo	(3) 		77 30 89
OR	18. Transporter 2 Acknowledgement or	Receipt of Materia	signature				M	Date onth Day Year
RTE	Printed/Typed Name		O'G' IGIGI				1	

FACILITY

19. Discrepancy Indication Space

Printed/Typed Name

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Month Day Year

State of California—Health and Welfare Agency HAZARDOUS WASTE MANAGEMENT BRANCH 2166-01089 UNIFORM HAZARDOUS WASTE MANIFEST 124-83

Department of Health Service

74e P Street Sacramento, CA 95814

FORM NO DHS 8022A 11 82

Please pri	nt or type with ELITE type (12 characters per inch).			ST.	ATE IC	) NU	JMBER	83	1056	351	.6
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	LIEURIUSTE MONGERENT ZE ERF 1282 SUN VALLEY, CALIF.									***************************************	7
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	This is to certify that the above-named wastes are properly classified, describe in proper condition for transportation according to the applicable requirement and the EPA.	id, packaged, ma its of the Depart	rked an ment o	id lab f Tran	eled, an Isportat	d are ion	M	0.	DAY	7	YR.
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GENERATOR RETAINS

SEE REVERSE SIDES FOR INSTRUCTIONS, PLEASE TYPE ORPRINTIGLEARLY,

## CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

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SIGNATURE OF AUTHORIZED AGENT & TIT HP 000081

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DATE ACCEPTED\*

▶ PRES≩ HARD	744 P STREET, SACRAM	NAGEMENT SECTION ENTO, CA 95814	7-1	160
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACIL	- 2 4 1	ALTERNATE TSD FACILITY	3-16
① NAME	(AUTHORI	ZED TO OPERATE UNDER AN	APPROVED STATE OR FEDERAL F	PROGRAM)
EPA NO.	NAME FINA		NAME	
ADDRESSCITY, STATE	EPA NO. <u>C は ひ ひ</u>	6 7 8 6 7 4 9		
ZIP CODE	ADDRESS 1216	11 254A R.L	ADDRESS	
ORDER PLACED BY CHILDRA ORDER	ZIP CODE LUCE	CONINA 9179	CITY, STATE,	
DATE	2 PHONE NO. 2/3-9	43.0916	PHONE NO	
CONTRACT NO.				
1 U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN	NA WEIGHT LINE		
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C	D. PPM G			——    <u>*</u>    **
D	N PPM	NONHAZARDOUS MATERIAL	Q	\ \\ PPM
WASTE PROPERTIES: PH TOXIC SELAMMA	CORROSIVE/IRRITANT	REACTIVE SENSI		
PHYSICAL STATE: SOLID LIQUID SLUDGE (		HER		•
1 SPECIAL HANDLING INSTRUCTIONS: GLOVES GOOD	GLES RESPIRATOR	OTHER		
GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE	E ABOVE NAMED MATERIALS /	ARE PROPERLY CLASSIFIED.	DESCRIBED PACKAGED MARKET	A LABELED AND ADD
		OF THE DEPARTMENT OF T	RANSPORTATION AND THE EPA.	TO CABELED, AND ARE
IN THE EVENT OF A SPILL CONTACT THE RESPONSE CENTER, U. S. COAST GUARD 1-80	NATIONAL ©	) Collect Market	Francisco de la Company	
THE STORE CENTER, O. S. COAST SUARD 1-80	0-424-8802.	SIGNATURE OF A	UTHORIZED AGENT & TITLE	DATE SHIPPED
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MAME LIQUID WASTE MANAGEMENT	100 110	12 69	· •	
EPA NO. C A D 0 0 0 0 7 2 8 4 3	JOB NO/	7	19 PICK UP DATE	
ADDRESS P.O. BOX 1082	UNIT NO.	1	TIME CN	AM APP
ZIP CODE SUN VALLEY, CALIFORNIA 91352				
PHONE NO. (213) 767-4424	(a) (b)	The state of the state of	A CONTRACTOR OF THE PROPERTY O	
			OF AUTHORIZED AGENT & TITLE	
TSD FACILITY (OPERATOR MUST COMPLETE)	JC () 70			
	73 dd x )	C. 11 67 Can	2.28	
PA NO.	1 QUANTITY IIF MEASURE	(D)	HANDLING OR DISPOSAL METHOD	<b>l</b> • ∏s.
	STATE FEE (IF ANY)	\$	SURFACE IMPOUNDMENT	LANDFILL
1 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIF	EST AND SHIPMENT		INJECTION WELL	LAND TREATMENT
M IF WASTE IS HELD FOR DELIVERY FLOORINGE COST			TREATMENT (SPECIFY)	- COND THEATMENT
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE D     NAME	ESIGNATED TSD FACILITY	1	RECOVERY OR REUSE	STORAGE/TRANSFER
EPA NO.	6			
PEVISED 11/80	<u> </u>		1 2	111 -5 -

RECEIVED State of California-Health and Welfare Agency AZARDOUS WASTE MANAGEMENT BRANCH UNIFORM HAZARDOUS WASTE MANIFEST MAY 20 1983 74 P Street 4-29-83 Sacramento, CA 95814 STATE ID NUMBER 8 3100707 Please print or type with ELITE type (12 characters per inch). GENERATOR NAME AND MAILING ADDRESS MANIFEST DOCUMENT NUMBER **EPA ID NUMBER** TRANSPORTER NO. 1 VEH./CONTAINER NO. TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY Something the Hold BUNG GENER HUC 111. 31 66 617 3 5 21 f 11 11 1 -10 1 765-1516 AREA CODE/PHONE NUMBER UN/NA CONTAINER WASTE DIS TOTAL UNIT PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS NUMBER QUANTITY WT/VOL NO. TYPE CAT NO. MET WASTE Soluble oil WATER CONC. RANGE UNITS COMPONENTS UPPER 9 Allton 1 WATEr SPECIAL HANDLING INSTRUCTIONS This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation Printed or typed full name and signature ☐ Check if continuation sheet is used. Number of continuation sheets TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES BE FILLED IN DAY FILLED IN DATE YR. KHIIIIEZ REC'D Printed or typed full name and signature TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES MO. DATE REC'D ACCEPTED Printed or typed full name and signature DISCREPANCY INDICATION SPACE 2.07 HP 000082 60 See 83078037 Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted DATE RECEIVED & ACCEPTED in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions. EPA ID NUMBER A4067718161748 TSDF RETAINS

HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P Street Sacramento, CA 95814

#### **UNIFORM HAZARDOUS WASTE MANIFEST**

6-22-83

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	DAN COPPS A.				n a	M ~ / 7.7	.0.1	7.4.9
	TREATMENT STORAGE OR DISPOSAL (TSDLEACHLITY				-	00677 EPA ID NU		
	Rho-Chem Corp		4				,	
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Ä	AREA CODEPHONE NUMBER			-	£ 14	BADDE	p 4	1432
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	portation according to the applicable regulations of the Department of	Transportation	n and the EPA		De.ed, 21	id are ilşproper d	.unaiti	on for trains
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SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

#### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

DATE ACCEPTED

**PRESS HARD** GENERATOR (GENERATOR MUST COMPLETE) (1) DESIGNATED TSD FACILITY • ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) NAME EPA NO. NAME ADDRESS EPA NO. ADDRESS **ADDRESS** CITY STATE CITY, STATE, PHONE NO. 1-1-5 ORDER PLACED BY \_\_\_\_\_ PHONE NO. PHONE NO. P.O. / CONTRACT NO. UN/NA WEIGHT (1) U. S. DOT PROPER SHIPPING NAME UNITS CONTAINERS NUMBER DUMP DRUMS WASTE BAGS CARTONS TANK OTHER WASTE CATEGORY ① EX. HAZ. WASTE PERMIT NO. • GENERATING PROCESS CONC. RANGE UNITS CONC. RANGE UNITS LIST COMPONENTS: UPPER LOWER UPPER LOWER NONHAZARDOUS MATERIAL \_\_\_\_ **WASTE PROPERTIES** FLAMMABLE REACTIVE SENSITIZER CORROSIVE/IRRITANT SOLID x' LIQUID SLUBBY SLUDGE SPECIAL HANDLING INSTRUCTIONS: OTHER GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) M NAME LIQUID WASTE MANAGEMENT C A D 0 0 0 0 7 2 8 FPA NO P.O. BOX 1082 ADDRESS CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATIOR MUST COMPLETE) SEE# 4100 HP 000084 (1) NAME 1 QUANTITY HE MEASURED! HANDLING OR DISPOSAL METHOD. 1 STATE FEE HE ANYL \$ SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) 1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE TRANSFER NAME EPA NO ME-VISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE

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Ģ.	SIGNATURE OF AUTHORIZE	ED AGENT & TITLE DATE ACCEPTED

HAZARDOUS MATERIALS MANAGEMENT

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See reverse side for instructions. State Department of Health Services 1 Manifest Please type or print clearly. Press Hard. HAZARDOUS MATERIALS MANAGEMENT SECTION Number OCT 1 3 1983 744 P Street, Sacramento, CA 95814 8970 3 Designated TSD Facility (Authorized to operate under an GENERATOR MUST COMPLETE) approved state program or federal program.) 4 Alternate TSD Facility Name EPA . C | H | D | C | F | 1/ 19 | 6 | 5 | 1 | 4 | 9 | Address 11. 11 51161, 41 Phone 975-2930 Address 2210 H 7. 6417 1 Phone 765-6916 Address City, State, Zip Shirt Valley City, State, Zip \_ City, State, Zip. U.S. DOT HAZARD CLASS WEIGHT OR VOLUME U.S. DOT PROPER SHIPPING NAME NUMBER OF CONTAINERS UNITS ID NO. Flammable TYPE: DRUMS BAGS CARTONS TANK TRUCK DUMP TRUCK 11 65 ru/. OTHER 7 Ext. Haz. Waste Permit No .... ... 8 Generating Process **CONCENTRATION RANGE CONCENTRATION RANGE** LIST COMPONENTS: LOWER UNITS LIST COMPONENTS: **UPPER** LOWER UNITS 9A 16451 111 \_ 🗆 % 🔲 ppm. □% □ppm. A (U) I to \_\_\_\_\_ Dpm. Non-Hazardous Material \_\_\_\_\_\_% 11 PHYSICAL STATE: Solid Kilguid Sludge Slugge Gas Other\_\_\_\_\_ 12 SPECIAL HANDLING INSTRUCTIONS: AGIOVES Googgles Respirator Other GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802 **TRANSPORTER** (HAULER MUST COMPLETE) 15 PICK-UP DATE \_\_\_\_\_ DISPOSAL CONTROL SERVICE EPA NO. | C | A | T | 0 | 8 | 0 | 0 | 3 | 4 | 1 | 8 | 4 | Time | AM | PM 14 TRANSPORTER NAME PHONE 714-983-0342 1627 W. 9th STREET **ADDRESS** UPLAND, CALIF, 91786 CITY, STATE, ZIP Signature of Authorized Agent and Title TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE) SEE# 1191 21 HANDLING OR DISPOSAL METHOD: Surface Impoundment Landfill 17 NAME 18 QUANTITY (If Measured) ☐ Injection Well ☐ Land Treatment Treatment (Specify) 20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT: Recovery or Re-use Storage/Transfer Recycle HP 000087 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY: 22 Designated TSD Facility Name. 23 Signature of Authorized Agent and Title **Date Accepted** 

State of California-Health and Welfare Agency HAZARDOUS: WASTE MANAGEMENT BRANCH 714-744 P Street Sigramento, ttA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

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#### UNIFORM HAZARDOUS WASTE MANIFEST

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Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the

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		/	Signature of Authorize	d Agent and little	Date
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CALIFORNIA HAZARDOUS WASTE MANIFEST

Department of Health Services UNIFORM HAZARDOUS WASTE MANIFEST Si cramento, CA 95814 83317595 STATE ID NUMBER Please print or type with ELITE type (12 characters per inch). GENERATOR NAME AND MAILING ADDRESS MARK ACCESSORY SERVICE MANIFEST DOCUMENT NUMBER AREA CODE/PHONE NUMBER (213) 575-2930 EPA ID NUMBER CH17100061462317 11 TRANSPORTER NO. 1 VEH./CONTAINER NO. EPA ID NUMBER MARKET CART CFRACE
1349 WASTER OF THE THE THE THE THE THE VEH/CONTAINER NO EPA ID NUMBER TRANSPORTER NO. 2/ALTERNATE TSD FACILITY TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY EPA ID NUMBER AREA CODE/PHONE NUMBER 213-965 C916 BE FILLED IN BY GENERATOR OAIH A 6717181617141 TOTAL UNIT CONTAINER WASTE DIS UN/NA PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS NUMBER QUANTITY WT/VOL NO. TYPE CAT. NO. MET 6 SCLUETE CONC. RANGE UNITS COMPONENTS UPPER LOWER 90 10 SPECIAL HANDLING INSTRUCTIONS This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. MO. Printed or typed full name and signature & dwin P. Conley Check if continuation sheet is used. Number of continuation sheets TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE MO. DAY REC'D Printed or typed full name and signature FILLED 13 **ACCEPTED** TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE MO. REC'D 2 ₹ Printed or typed full name and signature ACCEPTED

DISCREPANCY INDICATION SPACE

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ORM NO. DHS-8022A 11/82

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number.

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EPA ID NUMBER See instructions. Printed or typed full name and signature

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SPECIAL HANDLING INSTRUCTIONS		···	<u></u>					1	L
his is to certify that the above-named wastes are properly classified, described, proper condition for transportation according to the applicable requirements of the	packaged, marke Department of Te	ed and ranspor	labeled, and are tation and the E	e in PA.		<b>-</b> 1	541/	_	
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TO BE FILLED IN BY TRANSPORTER

TO BE FILLED IN BY TSDF

TO BE FILLED IN BY GENERATOR

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number.

See instructions.

EPA ID NUMBER

SE REVERSE SIDES FOR INSTRUCTIONS PLEASE YPE OR PRINT CLEARLY  PRESS HADD  GENERATOR (GENERATOR MUST COMPLETE)  3 NAME  EPA NO.  ADDRESS  CITY TATE  ZIP COOL  PHONE NO  ORDER PLACED BY  CONTRACT NO	ALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814  ③ DESIGNATED TSD FACILITY  ANAME  EPA NO.  ADDRESS CITY, STATE ZIP CODE PHONE NO.	363 02355  OALTERNATE ISD FACILITY  N APPROVED STATE OR FEDERAL PROGRAM)  NAME  EPA NO.  ADDRESS  CITY STATE ZIP CODE  PHONE NO.  PHONE NO.
WASTE	U S. DOT HAZARD UN/NA WEIGHT UNIT	DRUMS BAGS CARTONS DUMP TRUCK
B C D WASTE PROPERTIES PH TOXIC FLAME PHYSICAL STATE SOLID LIQUID SLUDGE	DEX. HAZ. WASTE PERMIT NO.  C. RANGE UNITS  PPM E  PPM F  PPM G  PPM NONHAZARDOUS MATERIAL  MABLE CORROSIVE IRRITANT REACTIVE SENS  SLURRY GAS OTHER  RESPIRATOR OTHER	CONC. RANGE UNITS  UPPER LOWER  PPM PPM PPM PPM PPM
GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO  IN THE EVENT OF A SPILL CONTACT TH  RESPONSE CENTER, U. S. COAST GUARD 1-	E NATIONAL OF TEXAS	D. DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE TRANSPORTATION AND THE EPA.
TRANSPORTER (HAULER MUST COMPLETE)  NAME LIQUID WASTE MANAGEMENT  EPA NO. C A D 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082  CITY STATE SUN VALLEY, CALIFORNIA 91352  PHONE NO. (213) 767-4424	JOB NO. UNIT NO	OF AUTHERIZED AGENT & TITLE
O NAME EPA NO. INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MAN		HP 000093  HANDLING OR DISPOSAL METHOD.  SURFACE IMPOUNDMENT LANDFILL  INJECTION WELL  LAND TREATMENT
	DESIGNATED TSD FACILITY  SIGNATURE OF AUTHORIZED	TREATMENT (SPECIFY) RECOVERY OR REUSE STORAGE/TRANSFER DAGENT & TITLE DATE ACCEPTED

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SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

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CA

## CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

363 - 002538

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	$\sigma^2$ .
GENERATOR MUST COMPLETE	① DESIGNATED TSD FACILITY	© ALTERNATE TSD FACILITY 3-5-82
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CONTRACT NO.	_ PHONE NO.	PHONE NO.
1 U. S. DOT PROPER SHIPPING NAME	U S DOT HAZARD UN/NA OR VOLUME UNITS	CONTAINERS NUMBER
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SPECIAL HANDLING INSTRUCTIONS:  GLOVES GOGG		
GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE	ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DE	ESCRIBED, PACKAGED, MARKED & LABELED, AND ARE
IN THE EVENT OF A SPILL CONTACT THE N		NSPORTATION AND THE EPA.
RESPONSE CENTER, U. S. COAST GUARD 1-800		HORIZED AGENT & TITLE DATE SHIPPED
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ADDRESS P.O. BOX 1082  CITY, STATE SUN VALLEY, CALIFORNIA 91352		
PHONE NO. (213) 767-4424	— <sub>@</sub> \\ \\	aller Vani
		AUTHORIZED AGENT & TITLE
TSD FACILITY (OPERATOR MUST COMPLETE)		
$\mathcal{C}$	(B) QUANTITY IIF MEASURED!	₩Р 000094
O NAME EPA NO.	@ QUANTITY IIF MEASURED!	ANDLING OR DISPOSAL METHOD
		SURFACE IMPOUNDMENT LANDFILL
1 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFES	ST AND SHIPMENT	INJECTION WELL LAND TREATMENT
1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DES	SIGNATED TSD FACILITY	TREATMENT (SPECIFY)
NAME		RECOVERY OR REUSE STORAGE/TRANSFER
EPA NO.	0 )19 (1	2/12
AEVISED 11/80	SIGNATURE OF AUTHORIZED AL	GENT & TITLE DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

### **CALIFORNIA HAZARDOUS WASTE MANIFEST** STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

363 - 902691 ECEIVED

DATE ACCEPTED

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	4002
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	
1 NAME / GITTEL FULLES	(AUTHORIZED TO OPERATE UNDER A	N APPROVED STATE OR FEDERAL PROGRAM)
EPA NO. CAT OL646257	NAME FAR	NAME
ADDRESS //- /C SHC /HQ / WYY	EPA NO. [C   D   D   6 7 R E 5 7 H S	
PHONE NO. 575-2550	ADDRESS 2210 AZSUA Rd CITY STATE WEST COVIND	ADDRESS
	PHONE NO.	ZiP CODE PHONE NO
P.O. CONTRACT NO.	- PHONE NO.	PHONE NO.
① U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/NA WEIGHT	
WASTE WASTE DI	U S DOT HAZARD UN/NA WEIGHT UNIT	
WASTE 10.7 Tel	Flammable NA 700 (42)	DRUMS BAGS CARTONS DUMP TRUCK
10.71.8.1	1270	TRUCK OTHER
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B W) t C 90		
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6)	SLURRY GAS OTHER	TITIZERCARCINOGEN/MUTAGEN
1 SPECIAL HANDLING INSTRUCTIONS: GLOVES GOOG		
GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE	E ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED HE APPLICABLE REQUIATIONS OF THE DEPARTMENT OF	D. DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE
IN THE EVENT OF A SPILL CONTACT THE		
RESPONSE CENTER, U. S. COAST GUARD 1-80	0-424-8802. SIGNATURE OF	Corler thating forming 4/14/82 AUTHORIZED AGENT & TITLE DATESHIPPED
TRANSPORTER (HAULER MUST COMPLETE)		
	2965	4/1/4/82
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CITY STATE SUN VALLEY, CALIFORNIA 91352	(	100 4)
PHONE NO. (213) 767-4424	• × ×	exvola Xhuver
	SIGNATURE	OF AUTHORIZE SAGENT & TITLE
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1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE D	ESIGNATED TSD FACILITY	TREATMENT (SPECIFY)  RECOVERY OR REUSE STORAGE TRANSFE
NAME		
EPA NO REVISED 11/80	6 (C) P12KG (C)	- W. S.

SIGNATURE OF AUTHORIZED AGENT & TITLE

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

DATE ACCEPTED

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	4-27-82				
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY				
ONAME PULLER FRITCH	(AUTHORIZED TO OPERATE UNDER AN	APPROVED STATE OR FEDERAL PROGRAM)				
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0.005.0	7/22PHONE NO.	PHONE NO.				
CONTRACT NO	<u>/-</u>					
(9) U. S. DOT PROPER SHIPPING NAME	U S DOT HAZARD UNINA WEIGHT UNITS	CONTAINERS NUMBER				
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IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO		RANSPORTATION AND THE EPA				
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PHONE NO. (213) 767-4424	(i)	) the Committee Harris				
	SIGNATURE	OF AUTHOMIZED AGENT & THILE				
TSD FACILITY (OPERATOR MUST COMPLETE)	2	HP 000096				
O NAME	@ QUANTITY HE MEASURED SC = 2778	HANDLING OR DISPOSAL METHOD				
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1 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MAN		INJECTION WELL LAND TREATMENT				
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IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE	E DESIGNATED TSD FACILITY	RECOVERY OR REUSE STORAGE THANSFE				
NAMEEPA NO TITITITI		(0) 4-120102				
REVISED 11 80	SIGNATURE OF AUTHORIZE	DAGENY A TITLE				

SIGNATURE OF AUTHORIZED AGENT & TITLE

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

NAME EPA NO REVISED 11 80 CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

363-1112877

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SIGNATURE OF AUTHORIZED AGENT & TITLE

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DATE ACCEPTED

**PRESS HARD** 

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

744 P STREET, SACRAMENTO, CA 95814 5-26-82 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY (ALTERNATE TSD FACILITY / UN 1 (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) ② NAME / EPA NO. NAME 1911 NAME EPA NO. EPA NO. ADDRESS **ADDRESS** CITY STATE, LY EST COVIND CITY, STATE, PHONE NO. 250-1720 ORDER PLACED BY PHONE NO. 1 2.121 415 - 69 PHONE NO. P.O. / CONTRACT NO (1) U. S. DOT PROPER SHIPPING NAME UNITS CONTAINERS NUMBER WASTE DRUMS DUMP BAGS CARTONS TANK WASTE OTHER ① EX. HAZ. WASTE PERMIT NO. GENERATING PROCESS CONC. RANGE CONC. RANGE UNITS LIST COMPONENTS UPPER LOWER UPPER LOWER NONHAZARDOUS MATERIAL (LV a / E PPM **WASTE PROPERTIES** FLAMMABLE X CORROSIVE IRRITANT REACTIVE SENSITIZER CARCINGGEN MUTAGEN LIQUID. SLURRY SLUDGE 1 SPECIAL HANDLING INSTRUCTIONS: JE GLOVES RESPIRATOR GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. DATE SHIPPED TRANSPORTER | (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT ON BOL C A D 0 0 0 0 7 2 8 4 3 EPA NO. UNIT NO ADDRESS P.O. BOX 1082 ZIP CODE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNALLINE OF AUTHORIZED ADENT & TITL TSD FACILITY (OPERATOR MUST COMPLETE) HP 000097 (1) NAME HANDLING OR DISPOSAL METHOD O STATE FEE HE ANY SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BÉTWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY)

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. DDECC HADD

### **CALIFORNIA HAZARDOUS WASTE MANIFEST** STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET SACRAMENTO CA 95814

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GENERATOR MUST COMPLETE	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
① NAME / TO Y	(AUTHORIZED TO OPERATE UNDEF	R AN APPROVED STATE OR FEDERAL PROGRAM)
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CITY, STATE.	ADDRESS THE THE THE PARTY OF TH	ADDRESS
PHONE NO. ORDER	ZIP CODE SUCCESS CONTRACT 11	CITY, STATE, ZIP CODE
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3 U. S. DOT PROPER SHIPPING NAME	U S. DOT HAZARD UN/NA WEIGHT OR VOLUME U	NITS CONTAINERS NUMBER
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IN THE EVENT OF A SPILL CONTACT TI		
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TRANSPORTER (HAULER MUST COMPLETE)		
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MAME LIQUID WASTE MANAGEMENT	JOB NO	PICK UP DATE
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ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352		<u> </u>
PHONE NO. (213) 767-4424		
PHONE NO. 1210/ 70/ 4424	<u> </u>	HE OF ANTHORIZED AGENT & TITLE
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TSD FACILITY (OPERATOR MUST COMPLETE)		2.73 HP 000098
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SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

REVISED 11/80

PRESS HARD

### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

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DATE ACCEPTED

744 P STREET, SACRAMENTO, CA 95814 GENERATOR | (GENERATOR MUST COMPLETE) (ALTERNATE TSD FACILITY ① DESIGNATED TSD FACILITY 1 NAME. (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME\_ **ADDRESS** EPA NO EPA NO. CITY, STATE, **ADDRESS ADDRESS** CITY, STATE, CITY STATE PHONE NO. \_ 2 2 50 + 32 94 574 ORDER 199102 PHONE NO. ORDER PLACED BY PHONE NO. P. O. / CONTRACT NO. WEIGHT OR VOLUME ( U. S. DOT PROPER SHIPPING NAME UNITS CONTAINERS NUMBER WASTE DRUMS BAGS WASTE WASTE CATEGORY\_\_\_\_\_ ① EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_ **⊙** GENERATING PROCESS \_\_\_\_\_\_ **J** ∈ \_\_\_\_ CONC. RANGE CONC. RANGE UNITS LIST COMPONENTS: UPPER LOWER UPPER LOWER NONHAZARDOUS MATERIAL \_\_\_ TOXIC FLAMMABLE CORROSIVE/IRRITANT REACTIVE SENSITIZER PHYSICAL STATE SOLID LIQUID SLUDGE SLURRY GLOVES SPECIAL HANDLING INSTRUCTIONS: GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. TRANSPORTER (HAULER MUST COMPLETE) M NAME LIQUID WASTE MANAGEMENT PICK-UP DATE C A D 0 0 0 0 7 2 8 ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE) HP 000099 (1) NAME 1 QUANTITY IIF MEASURED! HANDLING OR DISPOSAL METHOD: SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) 1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER EPA NO.

SEE REVERSE SIDES FOR INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

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PRESS HARD 6	744 P STREET, SACRAMENTO, CA 95814		a U
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CITY STATE. SUN UN HOLLEY CO. 9145"	ADDRESS CITY STATE DE COMMANDA	ADDRESS	
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CONTRACT NO.	PHONE NO.	PHONE NO.	
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MAME LIQUID WASTE MANAGEMENT	JOB NO	/	5 62
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PHONE NO. (213) 787-4424	ω		_d
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SEE REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION **PRESS HARD** 744 P STREET, SACRAMENTO, CA 95814 GENERATOR | (GENERATOR MUST CONTE (1) DESIGNATED TSD FACILITY **ALTERNATE TSD FACILITY** (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) ② NAME NAME BKK EPA NO. ADDRESS / EPA NO. **ADDRESS** CITY STATE LICS & COVING ORDER PLACED BY 1/9 PHONE NO. ( 2/ 3/ PHONE NO. P.O. / CONTRACT NO. U S. DOT HAZARD (1) U. S. DOT PROPER SHIPPING NAME WEIGHT OR VOLUME UNITS CONTAINERS NUMBER WASTE // SIC 0// DRUMS BAGS CARTONS WASTE OTHER WASTE CATEGORY\_\_ ② EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_ **O** GENERATING PROCESS CONC. RANGE UNITS CONC. RANGE LIST COMPONENTS: UNITS UPPER LOWER UPPER LOWER NONHAZARDOUS MATERIAL TOXIC FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER WASTE PROPERTIES: 1 PHYSICAL STATE SOLID LIQUID SLUDGE SLUBBY 1 SPECIAL HANDLING INSTRUCTIONS: GLOVES GOGGLES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT C A D 0 0 0 7 2 8 ADDRESS P.O. BOX 1082 ZIP CODE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | (OPERATOR MUST COMPLETE) HP 000101 1 NAME HANDLING OR DISPOSAL METHOD SURFACE IMPOUNDMENT LANDFILL M INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT \_ INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) 1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER NAME EPA NO

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DATE ACCEPTED

REVISED 11/80

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### UNIFORM HAZARDOUS WASTE MANIFE WOV 1 0 1982

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NAME

REVISED 11/80

1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

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HAZARDOUS MATERIALS MANAGEMENT SECTION **PRESS HARD** 744 P STREET, SACRAMENTO, CA 95814 12 1 1 1 2 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY ALTERNATE TSD FACILITY O NAME (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME ADDRESS EPA NO. EPA NO. CITY, STATE, **ADDRESS ADDRESS** CITY, STATE. CITY STATE ORDER 19-11-SEPHONE NO. ORDER PLACED BY \_\_\_ PHONE NO. CONTRACT NO 1 U. S. DOT PROPER SHIPPING NAME WEIGHT OR VOLUME UNITS CONTAINERS NUMBER Frr 141 DUMP DRUMS BAGS WASTE OTHER WASTE CATEGORY 1/7 - 4 4 ① EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_ GENERATING PROCESS CONC. RANGE LIST COMPONENTS: UNITS CONC. RANGE UNITS UPPER LOWER UPPER LOWER 11: PPM NONHAZARDOUS MATERIAL WASTE PROPERTIES. TOXIC FLAMMABLE CORROSIVE PRITANT REACTIVE SENSITIZER \_\_\_CARCINOGEN/MUTAGEN 1 PHYSICAL STATE SOLID SOLID SLUDGE SLUARY GAS **10** SPECIAL HANDLING INSTRUCTIONS: GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL MILLERA RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT JOB NO PICK UP DATE\_ C A D 0 0 0 0 7 2 8 4 EPA NO UNIT NO ADDRESS P.O. BOX 1082 ZIP CODE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | (OPERATOR MUST COMPLETE) HP 000103 O NAME HANDLING OR DISPOSAL METHOD SURFACE IMPOUNDMENT MINDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT LANDFILL INJECTION WELL LAND TREATMENT

SIGNATURE OF AUTHORIZED AGENT & TITLE

TREATMENT (SPECIFY)

RECOVERY OR REUSE

DATE ACCEPTED

STORAGE/TRANSFER

HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P Street Secremento, CA 95814

### **UNIFORM HAZARDOUS WASTE MANIFEST**

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# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

363 - 00201 123 81

DATE ACCEPTED

GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **O** ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) PA NO. NAME **DDRESS** 1744 A ... EPA NO. EPA NO. TY, STATE **ADDRESS** 17 214 SIT A. 26 .. **ADDRESS** CITY STATE HONE NO. CITY, STATE. ORDER RDER PLACED BY \_\_N PHONE NO. O. / PHONE NO. > > 3 U. S. DOT PROPER SHIPPING NAME U S. DOT HAZARD WEIGHT OR VOLUME I.D NO UNITS CONTAINERS NUMBER WASTE 110 00 UFFUSINE 4~ 1155 200 DRUMS BAGS CARTONS WASTE TANK OTHER **WASTE CATEGORY** O EX. HAZ. WASTE PERMIT NO. GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC. RANGE UPPER UNITS LOWER UPPER LOWER وجع ال NONHAZARDOUS MATERIAL WASTE PROPERTIES CORROSIVE IRRITANT JREACTIVE L SENSITIZER PHYSICAL STATE SOLID LIQUID SLUDGE SLUARY OTHER SPECIAL HANDLING INSTRUCTIONS: ENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT JOB NO. C A D 0 0 0 0 A NO. 7 UNIT NO P.O. BOX 1082 DDRESS TY STATE SUN VALLEY, CALIFORNIA 91352 IONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | (OPERATOR MUST COMPLETE) HP 000105 NAME HANDLING OR DISPOSAL METHOD O STATE FEE (IF ANY) SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER ٩ME A NO. 0 VISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE

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### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

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### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

363 --

DATE ACCEPTED

PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR GENERATOR MUST COMPLETE 1 DESIGNATED TSD FACILITY **•** ALTERNATE TSD FACILITY NAME (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) PA NO. NAME **DDRESS** 46 6 1. Al EPA NO. EPA NO. TY, STATE 1352 **ADDRESS ADDRESS** HONE NO. CITY, STATE 11. 11 ROLF PHONE NO. O. / ONTRACT NO PHONE NO. m177 (1) U. S. DOT PROPER SHIPPING NAME U.S. DOT HAZARD UNITS CONTAINERS NUMBER WASTE DUMP DRUMS BAGS WASTE TANK OTHER **WASTE CATEGORY** O EX. HAZ. WASTE PERMIT NO. GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC. RANGE UNITS UPPER LOWER CIL 1 (14 264DGE UPPER LOWER WATER WILL BIE CIC SOLVENTS NONHAZARDOUS MATERIAL FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER PHYSICAL STATE SOLID LIQUID SLUDGE SLUARY SPECIAL HANDLING INSTRUCTIONS: ENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE TRANSPORTER | (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT JOB NO. C A D 0 0 0 0 UNIT NO ODRESS \P.O. BOX 1082 TY STATE SUN VALLEY, CALIFORNIA 91352 IONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE) HP 000107 ) NAME OUANTITY IIF MEASURED! HANDLING OR DISPOSAL METHOD A NO. 1 STATE FEE (IF ANY) SURFACE IMPOUNDMENT LANDFILL ) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER AME 'A NO. VISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE

E REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST STRUCTIONS. PLEASE TYPE PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES 363 -HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 ENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **ALTERNATE TSD FACILITY** (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) A NO. DRESS EPA NO. **ADDRESS ADDRESS** CITY, STATE, ONE NO ORDER 4/17 PHONE NO. 3 U. S. DOT PROPER SHIPPING NAME OR VOLUME UNITS CONTAINERS NUMBER WASTE 111011 DRUMS DUMP BAGS WASTE OTHER WASTE CATEGORY O EX. HAZ. WASTE PERMIT NO. • GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC. RANGE UNITS UPPER UPPER LOWER 301 61 21 NONHAZARDOUS MATERIAL WASTE PROPERTIES MAMMABLE CORROSIVEHERITANT PHYSICAL STATE SOLID SPECIAL HANDLING INSTRUCTIONS NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. RANSPORTER | (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT JOB NO. C A D 0 0 0 0 7 2 8 4 3 UNIT NO P.O. BOX 1082 Y STATE SUN VALLEY, CALIFORNIA 91352 ONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE SD FACILITY (OPERATOR MUST COMPLETE) HP 000108

NAME LIQUID WASTE MANAGEMENT

A NO C A D O O O 7 2 8 4 3

DATE SUN VALLEY, CALIFORNIA 91352

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REVERSE SIDES FOR STRUCTIONS, PLEASE TYPE PRINT CLEARLY.

### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

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DATE ACCEPTED

HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 ENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **O ALTERNATE TSD FACILITY** (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) A NO. NAME CASMALIA DISPOSAC DRESS EPA NO. EPANO CADOS Y, STATE, ADDRESS ADDRESS ONE NO CITY, STATE, WEST COVINA ZIP CODE CAS MALLA DER PLACED BY PHONE NO. PHONE NO. 805 - 937-8449 NTRACT NO. 1 U. S. DOT PROPER SHIPPING NAME U. S. DOT HAZARD WEIGHT OR VOLUME UNITS CONTAINERS: NUMBER CHRUMIC ACID 5000 DRUMS BAGS DUMP CARTONS WASTE TANK OTHER WASTE CATEGORY ① EX. HAZ. WASTE PERMIT NO. GENERATING PROCESS LIST COMPONENTS CONC. RANGE UNITS CONC RANGE ONITS LOWER CHROMIC ACIO - NEUTRALITA-O UPPER LOWER 75% - 60% WATER NONHAZARDOUS MATERIAL WASTE PROPERTIES FLAMMABLE CORROSIVE/IRRITANT REACTIVE SENSITIZER CARCINOGEN/MUTAGEN PHYSICAL STATE SOLID LIQUID SLUDGE SLURRY GAS OTHER SPECIAL HANDLING INSTRUCTIONS: GLOVES GOOGLES NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE POPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA. IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. DATE SHIPPED RANSPORTER (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT JOB NO. C A D 0 0 0 0 7 2 8 4 3 UNIT NO. DRESS P.O. BOX 1082 Y. STATE. SUN VALLEY, CALIFORNIA 91362 DNE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE SD FACILITY | (OPERATOR MUST COMPLETE) NAME HP 000109 1 QUANTITY IIF MEASURED! HANDLING OR DISPOSAL METHOD: TATE FEE HE ANY SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY: RECOVERY OR REUSE STORAGE/TRANSFER

RE REVERSE SIDES FOR NSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY.

# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

**363** – 39335

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**CALIFORNIA HAZARDOUS WASTE MANIFEST** NSTRUCTIONS. PLEASE TYPE 363 - 01107 OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **(1)** ALTERNATE TSD FACILITY D NAME (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) PA NO OT NAME NAME ADDRESS EPA NO. TITY, STATE. **ADDRESS ADDRESS** CITY, STATE HONE NO CITY, STATE. PRDER PLACED BY PHONE NO. PHONE NO. ONTRACT NO 3 U. S. DOT PROPER SHIPPING NAME U S. DOT HAZARD UNITS CONTAINERS NUMBER WASTE ....... 500 DRUMS DUMP BAGS CARTONS WASTE OTHER **WASTE CATEGORY** O EX. HAZ. WASTE PERMIT NO. GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC. RANGE UPPER UNITS LOWER UPPER LOWER NONHAZARDOUS MATERIAL **WASTE PROPERTIES** FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER PHYSICAL STATE rianib') SLUDGE SOLID SLURRY 3 SPECIAL HANDLING INSTRUCTIONS. GLOVES RESPIRATOR SENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE N PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. TRANSPORTER (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT CADOOO DDRESS P.O. BOX 1082 TY STATE SUN VALLEY, CALIFORNIA 91352 HONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGEN TSD FACILITY (OPERATOR MUST COMPLETE) HP 000111 ) NAME HANDLING OR DISPOSAL METHOD PA NO. () STATE FEE (IF ANY) SURFACE IMPOUNDMENT LANDFILL 9 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) ) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER PA NO EVISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE DATE ACCEPTED

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SEE REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS. PLEASE TYPE 363 - 00224 OR PRINT CLEARLY. HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **O** ALTERNATE TSD FACILITY **② NAME** (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME **ADDRESS** EPA NO. EPA NO. CITY, STATE. **ADDRESS ADDRESS** CITY, STATE PHONE NO CITY, STATE, ORDER PLACED BY PHONE NO. CONTRACT NO. PHONE NO. 1 U. S. DOT PROPER SHIPPING NAME U.S. DOT HAZARD OR VOLUME UNITS CONTAINERS NUMBER DRUMS DUMP BAGS WASTE 13500 OTHER **WASTE CATEGORY** O EX. HAZ. WASTE PERMIT NO. • GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC RANGE UNITS LOWER UPPER LOWER NONHAZARDOUS MATERIAL WASTE PROPERTIES FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZEA PHYSICAL STATE Liquio SLUDGE SLUBBY GAS (1) SPECIAL HANDLING INSTRUCTIONS: GLOVES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802 TRANSPORTER (HAULER MUST COMPLETE) M NAME LIQUID WASTE MANAGEMENT JOB NO C A D 0 0 0 0 7 2 8 P.O. BOX 1082 ADDRESS CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | (OPERATOR MUST COMPLETE) 1. HP 000112 O NAME OUANTITY OF MEASURED HANDLING OR DISPOSAL METHOD EPA NO. TATE FEE (IF ANY) SURFACE IMPOUNDMENT LANDFILL 69 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) 1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER NAME 651 EPA NO. 0 REVISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE DATE ACCEPTED

363 - 01373OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **O** ALTERNATE TSD FACILITY 3 NAME (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME NAME ADDRESS EPA NO. EPA NO. CITY, STATE. **ADDRESS ADDRESS** CITY, STATE PHONE NO CITY STATE ORDER PLACED BY \_\_\_\_ PHONE NO. PHONE NO. P.O. / CONTRACT NO 3 U. S. DOT PROPER SHIPPING NAME U. S. DOT HAZARD UNITS CONTAINERS NUMBER WASTE DRUMS BAGS DUMP CARTONS WASTE TANK OTHER **WASTE CATEGORY** O EX. HAZ. WASTE PERMIT NO.\_ • GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC RANGE UNITS LOWER UPPER LOWER NONHAZARDOUS MATERIAL WASTE PROPERTIES - THE FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER SOLID LIQUID SLURRY J GAS SLUDGE SPECIAL HANDLING INSTRUCTIONS GLOVES S GOGGLES-SENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE N PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER | (HAULER MUST COMPLETE) M NAME LIQUID WASTE MANAGEMENT JOB NO. CADOOO UNIT NO. ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | (OPERATOR MUST COMPLETE) HP 000113 NAME 1 QUANTITY IIF MEASURED HANDLING OR DISPOSAL METHOD. PA NO 1 STATE FEE HE ANYL SURFACE IMPOUNDMENT LANDFILL 9 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) D IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER VAME PA NO 1E VISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE DATE ACCEPTED

CALIFORNIA HAZARDOUS WASTE MANIFEST

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56660 CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

363 - 01387

GENERATOR (GENERATOR MUST COMPLETE)  3 NAME EPA NO: ADDRESS CITY, STATE ZIP CODE PHONE NO DRDER PLACED BY CONTRACT NO	O DESIGNATED TSD FACILITY  NAME  EPA NO.  ADDRESS  CITY. STATE  ZIP CODE  PHONE NO.	ALTERNATE TSD FACILITY  PERATE UNDER AN APPROVED STATE OR FEDERAL P  NAME  EPA NO.  ADDRESS  CITY STATE  ZIP CODE  PHONE NO.	HOGRAMAUG 7 1981
① U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/NA CLASS I.D. NO OF	WEIGHT UNITS CONTAINERS NUMBER	
WASTE		100 10000	RTONS DUMP
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CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

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SEE REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **O** ALTERNATE TSD FACILITY ② NAME (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME NAME **ADDRESS** EPA NO. CITY, STATE. EPA NO. **ADDRESS ADDRESS** CITY, STATE PHONE NO \_ CITY, STATE, ORDER PLACED BY \_\_\_\_ ORDER PHONE NO. P.O. / CONTRACT NO. PHONE NO. 3 U. S. DOT PROPER SHIPPING NAME U. S. DOT HAZARD WEIGHT OR VOLUME UNITS CONTAINERS NUMBER 200 Sall DRUMS DUMP BAGS CARTONS WASTE OTHER WASTE CATEGORY ① EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_ GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC RANGE UPPER UNITS LOWER UPPER LOWER PPM NONHAZARDOUS MATERIAL \_\_\_\_ WASTE PROPERTIES TOXIC FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER \_\_\_CARCINOGEN/MUTAGEN PHYSICAL STATE | SOLID | LIQUID > [ @ SPECIAL HANDLING INSTRUCTIONS: GLOVES KI GOGGLES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT JOB NO. C A D 0 0 0 0 7 2 8 ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE) HP 000116 O NAME HANDLING OR DISPOSAL METHOD 1 STATE FEE HE ANYL SURFACE IMPOUNDMENT LANDFILL 9 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) if waste is held for delivery elsewhere, specify the designated tsd facility RECOVERY OR REUSE STORAGE/TRANSFER NAME PA NO

SIGNATURE OF AUTHORIZED AGENT & TITLE

DATE ACCEPTED

7E VISED 11/80

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3 NAME			<ul> <li>ALTERNATE TSD FACILIT</li> <li>N APPROVED STATE OR FEDERAL</li> </ul>	Υ '
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ORDER PLACED BY ORDER DATE	PHONE NO.		PHONE NO	
① U. S. DOT PROPER SHIPPING NAME	U S. DOT HAZARD	UN/NA WEIGHT		
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ELIST COMPONENTS CONC.	② EX. HAZ. WASTE . RANGE UNITS	PERMIT NO	GENERATING PROCESS	
AUPPER	LOWER PPM	<b>*</b>	CONC. ( UPPER	RANGE UNITS
B	J. PPM	F		\
	D & D PPM	G		——    %    PPM
D	PPM	NONHAZARDOUS MATERIAL	<u> </u>	\\ \PPM
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IN THE EVENT OF A SPILL CONTACT THE RESPONSE CENTER, U. S. COAST GUARD 1-80	NATIONAL WAZA 9902	0		/ w +
	70-424-8602.	SIGNATURE OF A	UTHORIZED AGENT & TITLE	DATE SHIPPED
TRANSPORTER (HAULER MUST COMPLETE)	į			· · · · · · · · · · · · · · · · · · ·
NAME LIQUID WASTE MANAGEMENT	JOB NO.	カヒもつ		10 m
PA NO. C A D 0 0 0 0 7 2 8 4 3	UNIT NO	2	PICK-UP DATE	
DDRESS P.O. BOX 1082	ONT NO		TIME _/	AMPM
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HONE NO. (213) 767-4424	<u> </u>	Al Allen	/ )	
		SIGNATURE O	DF, AUTHORIZED AGENT & TITLE	
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			SURFACE IMPOUNDMENT	\ \LANDFILL
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F WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DEAME	EST AND SHIPMENT	1) (next)	INJECTION WELL	i
) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE D	EST AND SHIPMENT	R Suzes	INJECTION WELL TREATMENT (SPECIFY)	LAND TREATMENT

SEE REVERSE SIDES FOR INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY.

## 57710 CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

363 - 01977 <sub>4</sub>1

MHESS HARD	744 P STREET, SACRAM	ENTO, CA 95814		9,
GENERATOR (GENERATOR MUST COMPLETE)  ② NAME	3 DESIGNATED TSD FACE	LITY	ALTERNATE TSD FACILITY  APPROVED STATE OR FEDERAL I	PROGRAMI
ADDRESS  CITY STATE  ZIP CODE  PHONE NO  ORDER PLACED BY  CONTRACT NO	ADDRESS CITY STATE	Contra Co	NAME EPA NO.  ADDRESS CITY, STATE. ZIP CODE  PHONE NO.	
③ U. S. DOT PROPER SHIPPING NAME WASTE WASTE	U S DOT HAZARD UN.	NA OR VOLUME UNITS	CONTAINERS NUMBER  DRUMS BAGS CA	ARTONS DUMP
B C D TOXIC FLANTSTEE	BOVE NAMED MATERIALS APPLICABLE REGULATIONS	Por Took	ESCRIBED, PACKAGED, MARKED	PPM PPM
TRANSPORTER (HAULER MUST COMPLETE)  NAME LIQUID WASTE MANAGEMENT  PA NO. C A D 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082  ITY STATE SUN VALLEY, CALIFORNIA 91352  PHONE NO. (213) 767-4424	JOB NO UNIT NO	(58°) 3 4) Z	O PICK-UP DATE TIME  AUTHORIZED AGENT & TITLE	DATE SHIPPED
O NAME  PA NO. INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST  O IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNAME.		s 3076	ANDLING OR DISPOSAL METHOD  SURFACE IMPOUNDMENT  INJECTION WELL  TREATMENT (SPECIFY)  RECOVERY OR REUSE	HP 000118  LANDFILL LAND TREATMENT  STORAGE/TRANSFER
PA NO. THE PART OF	<u> </u>	SIGNATURE OF AUTHORIZED A	GENT & TITLE	DATE ACCEPTED

CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS. PLEASE TYPE 363 - 02014 OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION **RRESS HARD** 744 P STREET, SACRAMENTO, CA 95814 GENERATOR (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **MALTERNATE TSD FACILITY** ② NAME (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME ADDRESS EPA NO. EPA NO CITY, STATE **ADDRESS** ADDRESS. PHONE NO CITY, STATE ORDER PLACED BY ORDER PHONE NO. PHONE NO. CONTRACT NO. 1 U. S. DOT PROPER SHIPPING NAME U S DOT HAZARD WEIGHT OR VOLUME UNITS CONTAINERS NUMBER 30 DRUMS DUMP BAGS CARTONS TANK OTHER WASTE CATEGORY ① EX. HAZ. WASTE PERMIT NO. **®** GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC. RANGE UPPER LOWER UNITS UPPER LOWER NONHAZARDOUS MATERIAL WASTE PROPERTIES FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER " PHYSICAL STATE SOLID LIQUID SLUDGE SLURRY GAS SPECIAL HANDLING INSTRUCTIONS. GLOVES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT, THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA. IN THE EVENT OF A SPILLICONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802 SIGNATURE OF AUTHORIZED AGENT & TITLE TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT JOB NO. C A D 0 0 0 0 EPA NO UNIT NO ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE) HP 000119 1 NAME HANDLING OR DISPOSAL METHOD EPA NO SURFACE IMPOUNDMENT LANDFILL 69 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) 1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER NAME EPA NO. REVISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE DATE ACCEPTED

SEE REVERSE SIDES FOR

SEE REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS. PLEASE TYPE 363 - 02230 OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR | (GENERATOR MUST COMPLETE) 1 DESIGNATED TSD FACILITY **ALTERNATE TSD FACILITY** AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM EPA NO. NAME **ADDRESS** EPA NO. CITY, STATE. EPA NO **ADDRESS ADDRESS** PHONE NO CITY STATE, And sugar CITY, STATE, ORDER PLACED BY ORDER / PHONE NO. CONTRACT NO. PHONE NO. 3 U. S. DOT PROPER SHIPPING NAME U S. DOT HAZARD WEIGHT OR VOLUME UNITS CONTAINERS NUMBER WASTE DRUMS BAGS DUMP CARTONS WASTE OTHER WASTE CATEGORY ① EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_ **•** GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC HANGE UPPER LOWER UNITS UPPER LOWER NONHAZARDOUS MATERIAL PPM WASTE PROPERTIES FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER CARCINOGEN/MUTAGEN PHYSICAL STATE SOLID LIQUID SLUDGE ( SLURRY, GAS OTHER SPECIAL HANDLING INSTRUCTIONS. CLOVES V GOOGLES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA. IN THE EVENT OF A SPILL CONTACT THE NATIONAL It have a seen RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT JOB NO. PICK-UP DATE C A D 0 0 0 0 7 2 EPA NO **UNIT NO** ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE) HP 000120 O NAME 1 QUANTITY OF MEASURED 1 1 5 6 HANDLING OR DISPOSAL METHOD EPA NO. TATE FEE HE ANY! S SURFACE IMPOUNDMENT (9) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT LANDFILL INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) ② IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER NAME EPA NO. REVISED 11/80

SIGNATURE OF AUTHORIZED AGENT & TITLE

DATE ACCEPTED

SEE REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR (GENERATOR MUST COMPLETE) ① DESIGNATED TSD FACILITY > 2 NAME SIPPLICKS EPA NO.

363 -

DATE ACCEPTED

**O** ALTERNATE TSD FACILITY CAUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAMI NAME > Mellotten **ADDRESS** EPA NO. EPA NO. CITY, STATE, Willer **ADDRESS PHONE NO** CITY, STATE, CITY, STATE 1 6 766 DATE / 13 7 PHONE NO. PHONE NO. 1 U. S. DOT PROPER SHIPPING NAME U S. DOT HAZARD WEIGHT OR VOLUME UNITS CONTAINERS NUMBER WASTE 3000 al DRUMS BAGS CARTONS WASTE TANK OTHER WASTE CATEGORY / 1/1/1/1/6 SLUDGE ① EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_ • GENERATING PROCESS CONC. RANGE LIST COMPONENTS UNITS CONC RANGE UNITS LOWER Chromic UPPER LOWER NA KIC NONHAZARDOUS MATERIAL PPM 9 WASTE PROPERTIES FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER ) PHYSICAL STATE LIQUID SLUDGE SLURRY GAS 3 SPECIAL HANDLING INSTRUCTIONS: GLOVES , GOGGLES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE A PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT C A D 0 0 0 0 7 2 8 4 3 EPA NO ADDRESS P.O. BOX 1082 CITY, STATE, SUN VALLEY, CALIFORNIA 91352 PHONE NO (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE) HP 000121 O NAME HANDLING OR DISPOSAL METHOD EPA NO. SURFACE IMPOUNDMENT LANDFILL 9 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) ② IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY. RECOVERY OR REUSE STORAGE/TRANSFER NAME EPA NO. REVISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE

### EE REVERSE, SIDES FOR ISTRUCTIONS, PLEASE TYPE R PRÍNT CLEARLY,

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET. SACRAMENTO. CA 95814

**363** – 726

ENEDATOR	744 F STREET, SACHAMENTO, CA 95814	
ENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
NAME THE PROPERTY OF STATE OF		N APPROVED STATE OR FEDERAL PROGRAM)
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CODE SIL	ADDRESS AAIL A THE THE	4 EPA NO. LA LA LA CARACTERIA DE LA CARA
ONE NO KARANA	CITY STATE. May 1	ADDRESS CITY STATE
NDER PLACED BY ORDER 177	I PHONE NO	CITY STATE.
NTRACT NO.		PHONE NO. 305 957 F 500
(1) U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/NA WEIGHT UNIT	S CONTAINERS NUMBER
WASTE CIM AND AND	5000 900	DRUMS BAGS CARTONS DUMP
WASTE		TANK OTHER
		THOCK A DINER
WASTE CATEGORY	① EX. HAZ. WASTE PERMIT NO	● GENERATING PROCESS
LIST COMPONENTS CONC. R	ANGE UNITS	CONC RANGE UNITS
Comment - prostopping top	BPM F	UPPER LOWER
The state of the s	S PPM F	
•	G	
1	NONHAZARDOUS MATERIAL	
WASTE PROPERTIES PH TOXIC FLAMMABL	E CORROSIVE/IRRITANT REACTIVE SENSI	
PHYSICAL STATE SOLID LIQUID'S SLUDGE	SLURAY GAS OTHER	TIZERCARCINOGEN/MUTAGEN
SPECIAL HANDLING INSTRUCTIONS: GLOVES GOGGL		
	RESPIRATOROTHER	
NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE	ABOVE NAMED MATERIALS ARE BRORERLY CLASSISIS	
NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE	APPLICABLE REGULATIONS OF THE DEPARTMENT OF T	DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE RANSPORTATION AND THE EPA
IN THE EVENT OF A SPILL CONTACT THE N	IATIONAL ION LA	to Plate shook
RESPONSE CENTER, U. S. COAST GUARD 1-800	424 8903	UTHORIZED AGENT & TITLE DATE SHIPPED
RANSPORTER (HAULER MUST COMPLETE)		OATE SHIPPED
	e11m	
NAME LIQUID WASTE MANAGEMENT	JOB NO	1 PICK-UP DATE
A NO. C A D 0 0 0 0 7 2 8 4 3	UNIT NO.	
DRESS P.O. BOX 1082		TIME 709 AM PM
V. STATE: SUN VALLEY, CALIFORNIA 91352	<u> </u>	
ONE NO. (213) 767-4424	•	
	SIGNATURE (	DE AUTHORIZED AGENT & TITLE
SD FACHITY CORE		
SD FACILITY JOPERATOR MUST COMPLETE)	W	.*\
NAME	@ QUANTITY IIF MEASURED 20.07	HP 000122
A NO. CONTRACTOR OF THE PROPERTY OF THE PROPER	STATE FEE HE ANY S 2010	HANDLING OR DISPOSAL METHOD:
INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFES		SURFACE IMPOUNDMENT LANDFILL
TOWN WOOD DE LANGUA MINIMIPES	AND STIFFMENT	INJECTION WELL LAND TREATMENT
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DES	SIGNATED ISD FACILITY	TREATMENT (SPECIFY)
ME	NOWATED TOD PACIETY TO	RECOVERY OR REUSE STORAGE/TRANSFER
ANO.	- o th, to	With the second second
/ISED 11/80	SIGNATURE OF AUTHORIZED	ACENT & TOTAL
	TO THE OF AUTHORIZED	DATE ACCEPTED

E REVERSE SIDES FOR STRUCTIONS, PLEASE TYPE PRINT CLEARLY. PRESS HARD

363 -

CALIFORNIA HAZARDOUS WASTE MANUES IVED

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814 JAN 2 9 1981

NAME PARKER BERGER A NO. CATALOGUE SERVER  A NO. CATALOGUE SERVER  ONE NO CATALOGUE  DER PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OF THE PLACED BY ORDER 1-7  OTHER OTHER OTHER OTHER OTHER OTHER 1-7  OTHER OTHER OTHER OTHER OTHER OTHER OTHER 1-7  OTHER OT	NAME BE CARLOS OF ALL COMMENTS OF AND COMMENTS	RIER CONTAINERS NUMBER
MASTE 64107 9 O/C	NONE 1000 GC	DRUMS BAGS CARTONS DUMP
WASTE		TANK OTHER
NASTE PROPERTIES  PH  TOXIC  FLAMMA  PHYSICAL STATE  SOLID  LIQUID  SLUDGE  SPECIAL HANDLING INSTRUCTIONS:  GLOVES  GOG	SLURRY GAS OTHER  GGLES RESPIRATOR OTHER	GENERATING PROCESS  CONC. RANGE UPPER LOWER  PPM PPM AL  %  NSITIZER  CARCINOGEN/MUTAGEN
NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE IN THE EVENT OF A SPILL CONTACT THE RESPONSE CENTER, U. S. COAST GUARD 1-80	NATIONAL (I)	ED DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE F TRANSPORTATION AND THE EBA.  LUS X X DATE SHIPPED
NAME LIQUID WASTE MANAGEMENT  NO C A D 0 0 0 7 2 8 4 3  PRESS P.O. BOX 1082  C STATE SUN VALLEY, CALIFORNIA 91352  DNE NO. (213) 767-4424	JOB NO	ONTESHIPED  SINCE PICK-UP DATE 1-8-5/  TIME 900 PAM PM  RE OF AUTHORIZED AGENT & TITLE
NAME NO INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIF  IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECILYAND  VE NO. INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIF	OUANTITY TO MEASURED!  STATE FOR THE ANY ISSUED OF THE ANY ISSUED	HP 000123  HANDLING OR DISPOSAL METHOD:  SURFACE IMPOUNDMENT LANDFILL  INJECTION WELL  TREATMENT (SPECIFY)  RECOVERY OR REUSE STORAGE/TRANSFER
11.60 17.60	SIGNATURE OF AUTHORIZ	ZED AGENT & TITLE DATE ACCEPTED

### CALIFORNIA LIQUID WASTE HAULER RECORD

STATE WATER RESOURCES CONTROL BOARD/STATE DEPARTMENT OF HEALTH

363- 4523 CODE NO. NAME: LIQUID WASTE MANAGEMENT Aviation Hydrraulies Name (print or type): PICK UP ADDRESS: P. O. BOX 1082 SUN VALLEY CALIFORNIA 9133 11310 Sherman Way **Business Address:** DATE: (Number) Sun Valley Ca. 91352 Telephone Number: (213) 767-4424 PO.# 12970E 011 State Liquid Waste Hauler's Registration No. (if applicable): 875-2930 No. of Loads or Trips: TYPE OF PROCESS WHICH PRODUCES WASTE & LECTRO BATING flatbed. other The described waste was hauled by me to the disposal (Examples: metal plating, equipment cleaning, oil drilling facility named below and was accepted. wastewater treatment, pickling bath, petroleum refining) I certify (or declare) under penalty of perjury that the foregoing is true and correct. CHECK TYPE OF WASTE tank bottom sediment signature of authorized agent and title HO acid solution drilling mud 2 alkaline solution pesticides contaminated soil and sand paint sludge 12 cannery waste latex waste solvent mud and water, 6 tetraethyl lead sludge chemical toilet wastes The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWOCB requirements, State Department of Health regulations, and local other (specify)\_ Quantity measured at site (if applicable) (Examples: Hydrochloric acid, lime, caustic sada, phéholies, solvents (list), metals (list) organics (list), cyanide) HANDLING METHOD(S): concentration ppm recovery treatment (specify) (Examples: Incineration, neutralization, precipitation) pond spreading landfill injection well Disposal Date:\_ I certify (or declare) under penalty of perjury that the foregoing is true and correct. Signature of authorized agent and little The site operator shall submit a legible copy of each completed Record to the State Department of Health PHYSICAL STATE: **DOT PROPER SHIPPING NAME** SPECIAL HANDLING INSTRUCTIONS (IF ANY). The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

Excertify (or declare) under penalty of perjury

that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

11-7-77

## CALIFORNIA LIQUID WASTE HAULER RECORD

	A COMPANIE OF TEREST
CODE NO.	<sup>363</sup> -4280.
ALIATION HYDROLICS	Name (print or type): LIQUID WASTE MANAGEMENT
11310 SIERMAN WAY DATE	Business Address: P. O. BOX 1082 SUN VALLEY, CALIFORNIA 91352 Code No.
DATE	(Number) (Street) - (City)
Dun Usliey - 41.342 10-379	(Date)
SUN UNIVOY - 131.342 10-5-79	
O NO.	Job No.: No. of Loads or Trips: Unit No.:
ME OF PROCESS WHICH PRODUCES WASTE MACHINE WORK	Vehicle:barrels,
Examples: metal plating, equipment cleaning, oil drilling castewater treatment, pickling both, petroleum refining)  Cede No.	The described waste was hauled by me to the disposal facility named below and was accepted.
Y.A. I. Sugar San San San San San San San San San San	I certify (or declare) under penalty of perjury that the foregoing is true and
CHECK TYPE OF WASTE 8 tank bottom sediment	correct.
1 ocid solution 9	Signature of authorized agent and title
2 alkaline solution 10 and drilling mud	
3 pesticides 11 contaminated soil and sand 4 paint sludge 12 cannery waste	Name (print or type):
5 solvent 13 latex waste	Site Address: 26919 Wenting / Typun Code No
6 Martetraethyl lead sludge 14 mud and water	
7 chemical toilet wastes 15 brine	The hauler above delivered the described waste to this disposal facility and it was an acceptab
other (specify)	material under the terms of RWOCB requirements, State Department of Health regulations, and loc restrictions.
	Quantity measured at site (if applicable):  State fee (if any):
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list) organics (list), cyanide)	
concentration % ppm	HANDLING METHOD(S):
1 VAICE BOOK	treatment (specify)
2 0 1 2 10 70	(Examples: incineration, neutralization, precipitation) cade no.
3	disposal (specify) pond spreading landfill injection
5	other (specify)
	If waste is held for disposal elsewhere specify final location:
	Disposal Date: 10 5 19
	Disposal Date:  1 certify (or declare) under penalty of perjury that the foregoing is true and
pH none toxic flammable corrosive explosive	correct.  Signature of authorized agent and title
BULK VOLUME: gal. tons (42 gal) (specify)	The site operator shall submit a legible copy of each completed Record to the State Despirement of Hec
CONTAINERS: arrows cartons bags (specify)	with monthly fee reports.
PHYSICAL STATE: (NUMBER) Solid Siquid sludge (sprify)	DOT proper cuipping his see
SPECIAL HANDLING INSTRUCTIONS (IF ANY)	DOT PROPER SHIPPING NAME
himse is described to the hest of my ability and it was delivered to a licensed liquid waste	HP 000125

Signature of authorized agent and title

er (if applicable).

The certify (or declare) under penalty of perjury that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

10 5.79

STATES OF STREET	CODE NO.	(-/3> 363-4217
Aviation Hydrraulics		Name (print or type): LIQUID WASTE MANAGEMENT
bosss 11310 Sherman Way		Business Address: P. O. BOX 1082 SUN VALLEY, CALIFORNIA 91352 Code No.
Sun Valley Ca. 91352	DATE	(Number) (Street) - (City) Time: pm
PO.# 12970E 011	11/10/11	State Liquid Waste Hauler's Registration No. (if applicable): 363
BL NO. 1875-2950		
0.NO.		
		Vehicle:
YPE OF PROCESS WHICH PRODUCES WASTE Examples: metal plating, equipment cleaning, oil drilling	Code No.	The described waste was hauled by me to the disposal facility named below and was accepted.
astewater treatment, pickling bath, petroleum refining)		I certify (or declare) under penalty of
A COLEMANIE OF A LANGE AND A L		perjury that the foregoing is true and correct.
CHECK TYPE OF WASTE	s tapk bettom sediment	Signature of authorized agent and title
1 💹 acid solution	o soil	AND A STATE OF THE PROPERTY AND A PARTY OF THE PROPERTY OF THE
2 alkaline solution	0 drilling mud	AND AND AND AND AND AND AND AND AND AND
	1 Secontaminated soil and sand 2 Secontaminated soil and sand	Name (print or type): 1 1 1 1 5 0 F G U 5 1 C Code No.
5 M solvent	3 latex waste	Site Address: 2450/ 50 FIGUEILE Code No.
6 tetraethyl lead sludge	4 M mud and water	
7 💽 chemical toilet wastes	5 brine	The hauler above delivered the described waste to this disposal facility and it was an acceptable
other (specify)		material under the terms of RWOCB requirements, State Department of Health regulations, and local restrictions.
	Code No.	Quantity measured at site (if applicable):State fee (if any):
(Examples: Hydrochloric acid, lime, cau		Godinity measured of site (if oppinione).
(list), metals (list) organics (list), cyanide		HANDLING METHOD(S):
	concentration % ppm	■ recovery
1		treatment (specify) (F. N. 6.7)   F. N. 11   Code no. (Examples: incineration, neutralization, precipitation) code no.
2		The state of the s
3 - (-9 -) (6)		disposał (specify) pond spreading de landfill injection well
4		other (specify) code no.
5		If waste is held for disposal elsewhere specify final location:
6		Disposal Date:
		I certify (or declare) under penalty of
2 (C. 12.2) (C.	Mary Mary Constitution of the Constitution of	perjury that the foregoing is true and correct.
pH	flementible	Signature of authorized agent and title
BULK VOLUME: 14 gal.	ns (specify)	The site operator shall submit a legible copy of each completed Record to the Stake Department of Healt with monthly fee reports.
CONTAINERS: M drums Co	other (specify)	w mr on 455 68/1 - 1
PHYSICAL STATE: (NUMBER) solid	wid sludge (specify).	DOT PROPER SHIPPING LANGING TASTE
SPECIAL HANDLING INSTRUCTIONS (IF ANY)	and A contract	
		Commence II RESTRALIZATION of
waste is described to the best of my ability and it	was delivered to a licensed liquid waste	

Signature of authorized agent and title

hauler (if applicable).

Trentify (or declare) under penalty of perjury

that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

HP

## CALIFORNIA LIQUID WASTE HAULER RECORD

	STATE MATER KESOURCES CONTR	OL BOARD/STATE DEPARTMENT OF HEALTH	
WASTE (Must be filled by producer)	COD€ NO.	HAULER OF WASTE (Must be filled by hauler)	363-3942
MODESS. 11110 MANAN WAY		Name (print or type): LIQUID WASTE MANAGEMENT	
	DATE:	Business Address: P. O. BOX 1082 SUN VALLEY, CALIFOR	NIA 91352 Code No
	DAIE:	(Number) (Street) Telephone Number: (213) 767-4424 Pick Up: (Date)	(Cirty) am
TEL NO./ CONTACT:		State Liquid Waste Hauler's Registration No. (if applicable):	363
P. O. NO		Job No.:No. of Loads or Trips:	Unit No :
TYPE OF PROCESS WHICH PRODUCES WASTE		Vehicle: barrels, flatbed,	other
(Examples: metal plating, equipment cleaning, oil drilling wastewater treatment, pickling bath, petroleum refining)	Code No.	The described waste was hauled by me to the disposal facility named below and was accepted.	(specify)
DESCRIPTION OF WASTE (Must be filled by producer)		certify (or declare) under penalty of	) " ************************************
CHECK TYPE OF WASTE 8 1 tar	nk bottom sediment	perjury that the foregoing is true and correct.	A Care
1 acid solution 9 Solution		· Signature of	authorized agent and title
<sup>2</sup> alkaline solution 10 dri		DISPOSER OF WASTE (Must be filled by disposer)	/
	ntaminated soil and sand		
4 ☐ paint sludge 12 ☐ car 5 ☐ solvent 13 ☐ late	nnery waste	Name (print or type):	
	d and water	Site Address:	Code No.
7 chemical toilet wastes 15 brin	I	•	
other (specify)	<del></del>	The hauler above delivered the described waste to this disposal facility material under the terms of RWOCB requirements, State Department of H restrictions.	and it was an acceptable lealth regulations, and local
(Examples: Hydrochloric acid, lime, caustic soda, p (list), metals (list) organics (list), cyanide)	phenotics, solvents	Quantity measured at site (if applicable):	State fee (if any).
	concentration % ppm	HANDLING METHOD(S):	3
1	lower upper	recovery	
2		treatment (specify)	
		(Examples: incineration, neutralization, precipitation)	code no.
3		disposal (specify) 🔯 pond 🔲 spreading 🛄 landfill 🔲 inje	ction well
4		other (specify)	
5			code no
6		If waste is held for disposal elsewhere specify final location.	
HAZARDOUS PROPERTIES OF WASTE		Disposal Date:	, ,
pH none toxic I flammable	corrosive explosive	I certify (or declare) under penalty of perjury that the foregoing is true and correct.	•
	-g barrels other		uthorized agent and title
BULK VOLUME:   gal tons    CONTAINERS:   drums cartons    PHYSICAL STATE: solid liquid	(42 gal)   (specify)   other (specify)	The site operator shall submit a legible copy of each completed Record to the with monthly fee reports.	s State Department of Health
•	sludge other (specify)	DOT	
SPECIAL HANDLING INSTRUCTIONS (IF ANY)		DOT PROPER SHIPPING NAME	
The waste is described to the best of my ability and it was deliver hauler (if applicable).	ed to a licensed liquid waste		HP 000127

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

# CALIFORNIA LIQUID WASTE HAULER RECORD STATE WATER RESOURCES CONTROL BOARD/STATE-DEPARTMENT OF HEALTH

process which produces waste	A STATE OF THE STA	<b>300</b>
SUIT VALIBY Ca. 91352 PO. 1297UE 011 NO. 875-293() NO. E OF PROCESS WHICH PRODUCES WASTE I acid solution gold milling thewater treatment, picking both, petroleum refining)  CHECK TYPE OF WASTE 1 acid solution 10 drilling mud 2 calk cline solution 10 drilling mud 3 positicides 11. contaminated soil and sand 4 point sludge 12 cannery waste 5 solvent 13 datex waste 6 tetraethyl lead sludge 14 mud and water 7 chemical toilet wastes 15 brine concentration other (specify)  Code No.  (Examples: Hydrochloric acid, lime, countil seda, phenolics, solvents (list), metals (list) organics (list), cyande)  The volume of the concentration to the concentration of the	vistion Nydenaul	CODE NO.
PO - 129708 011  NO 129708 011  NO E OF PROCESS WHICH PRODUCES WASTE	11310 Shanna	CS
POUR 129708 011  NO  E OF PROCESS WHICH PRODUCES WASTE	Sun Way	
POUR 129708 011  NO  E OF PROCESS WHICH PRODUCES WASTE	Sun valley Ca. 913	52 PAR 7 - 7
E OF PROCESS WHICH PRODUCES WASTE	FU-# 12970B 011	8-6
E OF PROCESS WHICH PRODUCES WASTE	No./ 875-2930	
E OF PROCESS WHICH PRODUCES WASTE	) NO	
Described plating, equipment cleaning, oil drilling stewarter treatment, pickling bath, petroleum refining)  CHECK TYPE OF WASTE  1		that I
CHECK TYPE OF WASTE	amples: metal plating, equipment cleaning, oil de	illing Code N
CHECK TYPE OF WASTE  1	stewater treatment, pickling bath, petroleum refir	nina)
acid solution  alkaline solution  pesticides  paint sludge  point sludge  solvent  intercept waste  tetraethyl lead sludge  te	WILLIAM OF WASTE COME AS THE COME	
acid solution  alkaline solution  pesticides  11	CHECK TYPE OF WASTE	8 at tank bottom sediment
paint sludge  paint sludge  solvent  tetraethyl lead sludge  tetraethyl lead s	1 🐼 acid solution	9.
paint sludge  paint sludge  solvent  tetraethyl lead sludge  tetraethyl lead s	2 🕦 alkaline solution	10 Marilling mud
solvent    13   latex waste   14   mud and water   15   brine   15   b	3 🔯 pesticides	
tetraethyl lead sludge  7 chemical toilet wastes  15 brine  (Examples: Hydrochloric acid, lime, caustic sada, phenolics, solvents (list), metals (list) organics (list), cyanide)  Code No.  (Examples: Hydrochloric acid, lime, caustic sada, phenolics, solvents (list), cyanide)  concentration lower upper  1 concentration  1 concentration  2 concentration  1 concentration  2 concentration  3 concentration  4 corrective  explosive  DILK VOLUM:  Solid	4 🗱 paint sludge	12 💹 cannery waste
other (specify)  (Examples: Hydrochloric acid, lime, caustic seda, phenolics, solvents (list), metals (list) organics (list), cyanide)  (Examples: Hydrochloric acid, lime, caustic seda, phenolics, solvents (list), metals (list) organics (list), cyanide)  (Oncentration lower upper 1  2  3  4  5  6  PH  none toxic flammable carrestve explosive explosive other (specify)  DILK VOLUM: (A2 gai) (specify)  DNTAINERS: (NUMBER) organics (solid solvers)  WISICAL STATE: (NUMBER) solid solid solvers  ECIAL HANDLING INSTRUCTIONS (IF ANY).	<b>=</b>	13 🚮 latex waste
Other (specify)  (Examples: Hydrochloric acid, lime, countic toda, phenolics, solvents (list), metals (list) organics (list), cyanide)  Ococentration lower upper and lower up		14 🔣 mud and water
(Examples: Hydrochloric acid, lime, coursic sada, phenolics, solvents (list), metals (list) organics (list), cyanide)  concentration lower upper  1	7 chemical toilet wastes	15 Drine
(Examples: Hydrochloric acid, lime, coursic soda, phenolics, solvents (list), metals (list) organics (list), cyanide)  concentration lower upper  lower upper  ph	other (specify)	
pH		Code No.
pH	(list), metals (list) organics (list),	concentration % ppm
pH		
pH	2. Chiones and	
DILK VOLUME  ONTAINERS:  (NUMBER)  BYSICAL STATE:  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).	3 Canada Contra	
DILK VOLUME  ONTAINERS:  (NUMBER)  BYSICAL STATE:  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).	1 Tropped	— <i>—</i>
DILK VOLUME  ONTAINERS:  (NUMBER)  BYSICAL STATE:  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).	5	
DILK VOLUME  ONTAINERS:  (NUMBER)  BYSICAL STATE:  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).	8 <u> </u>	
DILK VOLUME  ONTAINERS:  (NUMBER)  BYSICAL STATE:  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).		
DILK VOLUME  ONTAINERS:  (NUMBER)  BYSICAL STATE:  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).	ALCOHOLD THE STATE OF THE	
ONTAINERS: (NUMBER) of my ability and it total delivered to a licensed liquid waste of applicable).	pH_4-9 none toxic	Hammable correctve explosive
ONTAINERS: (NUMBER) of my ability and it total delivered to a licensed liquid waste of applicable).	2/-0-1	4 TI
BYSICAL STATE: Solid Clark studge of epecify)  ECIAL HANDLING INSTRUCTIONS (IF ANY)  aste is described to the best of my ability and it was delivered to a licensed liquid weste of applicable).	JLK VOLUNS: 500 Emil.	toris (42 gal) (specify)
STATE: solid State stade (specify).  ECIAL HANDLING INSTRUCTIONS (IF ANY).  aste is described to the best of my ability and it true delivered to a licensed liquid wester (if applicable).	ONTAINERS: (NUMBER) Mrums	
aste is described to the best of my ability and it was delivered to a licensed liquid wester of applicable).		Slight studge (specify)
(if applicable).	ECIAL HANDLING INSTRUCTIONS (IF ANY)	
(if applicable).		1101
	raste is described to the best of my ability or	nd it Was deligeted to a licensed liquid weste
	fy (or declars) under namely of marium	

(A.	The same of the sa		``	36	3-3612
44					2070
Name (print or type):	LIQUID WA	STE MAN	AGEME	NT	
Business Address:	P. O. BOX 1082	SUN VALLE	Y, CAUP	ORNIA 91	352 Code
Telephone Number: (	(Number) 213) 767-4424	Man (Show)	7	G(City)	Time
State Liquid Waste Haul	Light Land Street		(Date)	363	. I WINE:
Job No.:		Market E	(		7
Vehicle:	vacuum truck L24	Omes D	flatbed,	Unit N	lo.:
The described wast	was hauled by me to the	dienoral			(specify)
racility named belo	w and was accepted, 🔠		0 0	)	
perjury that the	clare) under penalty foregoing is true ar	of 7	VI	1000	<b>&gt;</b> //
correct.		$\Delta$			
	1		Signatur	e of authorize	d agent and title
18 32 E. P.	4 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
					<del></del>
Name (print or type):	<u> </u>	LAK.	<u> </u>		
Site Address:	(67, c) = 0	4. Veir	70,4	~	Code
THE INDIVIDUAL INCIDENT	delivered the described terms of RWOCB requi	waste to this	dienaral fa		was an accep gulations, and
restrictions.	delivered the described	waste to this crements, State D	disposal fa epartment		gulations, and
restrictions.	delivered the described terms of RWOCB requi	waste to this crements, State D	disposal fa epartment	cility and it of Health re	gulations, and
restrictions.  Guantity measured at air  HANDLING ME	delivered the described terms of RWOCB require (if applicable):  THOD(S):	waste to this crements, State D	disposal fa epartment	cility and it of Health re	gulations, and
Pestrictions.  Countity measured at air  HANDLING ME recover	delivered the described terms of RWOCB require (If applicable):	waste to this crements, State D	disposal fa epartment	cility and it of Health re	gulations, and
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HANDLING ME  recover  treates  dispose  fi waste is held for dispo  Disposal Date:  I certify (or deck	telivered the described terms of RWOCB requires (if applicable):  (if applicable):	waste to this crements, State D	disposal far repartment	cility and it of Health re State fee (i	gulations, and
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HANDLING ME  recover  treating  dispose  f waste is held for dispo  Disposal Date: 1 certify (or deck perjury that the correct.  The site operator showith monthly fee repo	delivered the described terms of RWOCB requires (if applicable):  THOD(S):  (Examples: incineration, (Examples: incineration, other (specify) other (specify) other (specify) under penalty of oregoing is true and	waste to this crements, State D	disposal failepartment	State few (i	gulations, and famy):code ne

that the foregoing is true and correct.

Signature of authorized agent and title

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.